# देश योजना तथा वास्तुकला विद्यालय, विजयवाड़ा School of Planning and Architecture, Vijayawada An Institute of National Importance, MHRD, Govt. of INDIA.

Survey No.4/4, ITI Road, Vijayawada-520008, Andhra Pradesh, India. www.spav.ac.in, Phone: +91 866 2469 446, Telefax: +91 866 2469 451

APPLICATION NO (For Office Use only)	)						on: ce Use only)		
APPI					DOCTORAL	L P	ROGRAMME fully before applying)		
In the Department (Architecture/Plan									
Course Type		Full Time PhD							
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Registration No.							Please Affix		
Date of receipt							Recent Passport size		
Enclosures receiv	ed						Photograph.		
Details of Payment:-									
Application Fee :		No. Dete							
	DD		Date		Amount		Bank Name		
PERSONAL RECO	<u>DRD</u>	Na	me		Middle Name		Surname		
1. Name							(in En	glish)	
2. Father's/Husband's/ Guardian's Name							(in I	<u> Hindi)</u>	
3. Postal Addres communicatio	n								
with telephone	e number			1			L		
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Permanent Ac	ddress								
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4.	Date of Birth	
5.	Nationality	
6.	State of Domicile	
7.	Whether you intend to avail the benefit of belonging to SC/ST/PH/ OBC community? (If so, mention the category clearly and attach attested copy of the Certificate in prescribed form)	
8.	Research Proposal - Proposed broad area of research, nature, objectives and scope of the subject, importance, tentative title on the proposed research work in approximately 500 words (Use separate sheets – Refer Annexure-I)	

## 9. Education Record

**N.B.** (i) Information in respect of all examinations passed from the first year Degree Course onwards to be recorded. All entries must be supported by attested copies of certificates/ marks sheets.

Name of the College	Examination	Year of	Class/	Marks	Maximum	* Percentage of
University	passed	Passing	Division	Obtained	Marks	Aggregate Marks Obtained
						Obtained
				1		

Note: Aggregate percentage of marks be based on marks/grade in all the semester/annual examinations completed so far (if marks are shown in grades, numerical equivalent percentage is to be indicated).

### 10. Details of Experience

Please provide your work experience in chronological order beginning with the latest/most recent assignment.

**N.B.** Information must be supported by attested copies of testimonials/ experience or service certificates/. Detailed description of the jobs undertaken may be furnished in a separate sheet.

S.No.	Name of Organisation	Post held with Pay-scale/Pay Band with Grade Pay (Or Pay Level)	Description and type of work in teaching/research/ professional practice	Period (from – to)

### 11. Record of Enclosures (Attested copies of certificates/documents)

1	6
2	7
3	8
4	9
5	10

#### **APPLICANT'S DECLARATION**

(i) I hereby declare that the entries in this form are true to the best of my knowledge and belief. I have satisfied myself that I fulfill all the eligibility requirements.

(ii) I understand that the admission is granted to me on the terms, conditions and rules of the School and such modifications thereof as may by the authorities concerned. I agree to abide by the rules and regulations of the School for the time being in force and such modifications thereof, which may hereafter be made. I understand that my admission may be cancelled if any information furnished by me is proved to be false even on a later date.

- (iii) I agree that the Dean Academic/Director's decision in all matters concerning my admission, studies, scholarship, discipline and conduct will be final and binding on me.
- (iii) I understand that my association active or passive with any unlawful organizations is forbidden.

(iv) I agree that the School shall have the right to forfeit my security deposits *inter alia* on the ground of my failure to claim the refund within two years from the date of leaving the school.

Dated: \_\_\_\_\_

# Application for Admission to Doctoral Programme at SPA Vijayawada

# Instructions for the Applicants

- 1. Applicants are required to go through the details available at SPAV website: <u>www.spav.ac.in</u>.
- 2. The applications for admission to the Ph.D. programmes shall be made to the School in response to advertisement on the prescribed form.
- 3. Completed application form accompanied by Demand Draft of `3000/- towards processing fee (`2000 in case of SC, ST and physically handicapped candidates), in favour of 'School of Planning and Architecture Vijayawada, payable at Vijayawada, superscribing "Application for Admission into PhD (Full Time)" on the envelope and should be sent to 'The Registrar, SPA Vijayawada, Survey No.4/4, ITI Road, Vijayawada-520008, Andhra Pradesh, India' by post only along with the required documents on or before January 09, 2019 by 5.00pm.
- 4. The applicants are required to indicate the following information in the application:
  - i. Department;
  - ii. Research proposal containing broad area of research, nature, objective and scope with its relevance and importance to the body of knowledge, along with tentative title (Refer : Annexure I)
- 5. Sponsored/in-service applications should apply through their office/Institute/University and produce NOC (Refer: Annexure-II).
- 6. Further information related to interview and selection shall be put up at the website in due course of time.

# Application for Admission to Doctoral Programme – SPA Vijayawada RESEARCH PROPOSAL

Research proposal containing broad area of research, nature, objective and scope with its relevance and importance to the body of knowledge, along with tentative title; (Maximum two pages per proposed title, including the space on this page and on the reverse side Use separate sheets, if required).

.....

Place :....

Date : .....

#### **EMPLOYER'S CERTIFICATE**

I, the undersigned, do hereby declare that to my personal knowledge, the details furnished by the applicant in the form are correct.

Shri/Smt./Km.....is in our service as.....in the pay-scale/Pay Band with Grade Pay (Or Pay Level) of `.....and drawing the total emoluments of `.....Per month. He/She joined our Office/Institute/University on...... His/Her application is forwarded for admission. He/She shall be treated as sponsored candidates/ non-sponsored candidate and will be paid salary/will be paid salary/will not be paid salary or financial assistance for undergoing the Ph.D. Programme.

Name and address of Employer/Organisation

Dated: \_\_\_\_\_

Signature & Seal of the Forwarding Authority