



UNIVERSITY SCHOOL OF MANAGEMENT STUDIES
GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

SEC-16-C, DWARKA NEW DELHI -78


Sub: Admission to PhD programme for the Academic Session 2022-23- List of Selected Candidates (AS-2022)

The admission committee for PhD Programme at USMS, has approved the following candidates for admission to the programme for the academic session 2022-23.

S. No.	APPLICATION No.	NAME OF THE CANDIDATE	Category	FT/PT	NET(JRF)/PET/M.Phil	Allotted Supervisor
1	221220000098	Nupur Soti	Gen	FT	PET	Dr. Ashish Kumar
2	221220000288	Bhawika Batra	Gen	FT	UGC Net (Including JRF)	Dr. Amit Sharma
3	221220000060	Chinki	Gen	FT	UGC Net (including JRF)	Prof. Neena Sinha
4	221220000122	Abhishek	Gen	FT	UGC Net (including JRF)	Prof. Sanjay Dhingra
5	221220000151	Anvi Jain	Gen	PT	PET	Prof. Neena Sinha
6	221220000231	Ipsa Saxena	Gen	PT	PET	Prof. A.K. Saini
7	221220000275	Aeshna Kharbanda	Gen	FT	PET	Dr. Gagan Deep Sharma
8	221220000076	Shaleen Sharma	Gen	PT	PET	Dr. S. Sanjay Kumar
9	221220000099	Gurveen	Gen	PT	UGC Net (Including JRF)	Dr. Amit Sharma
10	221220000061	Jyoti	Gen	FT	PET	Prof. Shalini Garg
11	221220000228	Liza	Gen	FT	PET	Prof. Vijita S. Aggarwal
12	221220000337	Deepika Chhikara	Gen	PT	PET	Dr. Amit Sharma
13	221220000064	Shivang Chawla	Gen	FT	UGC Net (Including JRF)	Prof. A.K.Saini
14	221220000408	Monika Sareen	Gen	PT	M. Phil	Dr. Divya Verma
15	221220000236	Priya Gupta	Gen	FT	UGC Net (including JRF)	Prof. Puja Khatri
16	221220000011	Sheela Narang	Gen	FT	PET	Dr. Amit Sharma

17	221220000224	Ashish Kumar	SC	FT	UGC Net (including JRF)	Dr. S. Sanjay Kumar
18	221220000296	Ishant Kumar	SC	FT	M. Phil	Prof. Vijita S. Aggarwal
19	221220000163	Sugandh Bhatia	SC	FT	UGC Net (including JRF)	Prof. Vijita S. Aggarwal

Details of the further requirement will be uploaded later.


(Prof. Anil K. Saini)
Dean, USMS



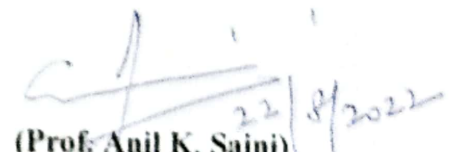
COUNSELLING NOTICE

Sub: Admission to Ph.D. (Management) programme for the Academic Session 2022-23.

The admission committee for PhD Programme at USMS, has approved the candidates (selected list attached) for admission to the programme for the academic session 2022-23.

The selected candidates are required to report in Room No. D-213, D Block, GGSIP University, Sector 16 C, Dwarka, New Delhi - 110078) on 26th August 2022 at 11 AM for counselling and document submission and completion of admission process. The candidates shall bring the following documents:

1. A DD of Rs.57,000/- (including refundable security amount of Rs.10000/-) Rupees Fifty Seven Thousand Only – in favour of Registrar, Guru Gobind Singh Indraprastha University payable at Delhi.
2. One set of all the educational qualification documents/ certificates (self-attested copy of Master's degree/marksheet/provisional certificates, etc).
3. No-objection certificate from Employer, if employed (for Part Time).
4. Self – attested copy of the relevant documents under which any (JRF/M.Phil) exemption/relaxation has been claimed (if applicable).
5. Certificate of Reservation (SC/ST/EWS/PWD).
6. One copy of the duly filled-in application form for Registration, I-Card/Membership Form and Internet Access Login Facility Form attached with this notice;
7. Six Passport size photo.


(Prof: Anil K. Saini)
Dean, USMS

Copy to :

1. DRC, GGSIPU for kind information.
2. Incharge, UITS with a request to upload the same.
3. Guard File.



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

Sec-16-C, Dwarka Campus, Delhi-110 078

Website: <http://ipu.ac.in>

OFFICE OF THE DIRECTOR (RESEARCH & CONSULTANCY)

APPLICATION FORM FOR REGISTRATION IN THE Ph.D. PROGRAMME

1	Academic Session:				<div>Attach Photograph</div>					
2	Full Time:	<input type="checkbox"/>	Part Time:	<input type="checkbox"/>						
3	Roll No. (For Office use only):									
4	Name of the Research Scholar (In Capital Letters):									
5	Discipline:									
6	Name of the School:									
7	Name of the Supervisor:									
8	Address for Correspondence :									
9	E Mail Id:									
10	Contact No.									
11	Father's/ Husband's Name:									
12	Mother's Name:									
13	Date of Birth:	<table border="1"><tr><td>Day</td><td>Month</td><td>Year</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	Day	Month	Year	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Day	Month	Year								
<input type="text"/>	<input type="text"/>	<input type="text"/>								
14	Category:	Gen/ O.B.C.: <input type="checkbox"/>	SC: <input type="checkbox"/>	ST: <input type="checkbox"/>	PWD: <input type="checkbox"/>	Male/ Female: <input type="checkbox"/>				

15 Details of the Academic Qualifications & Experience:

(a) Academic Qualifications (Attach Documentary Evidence(s):

S. No.	Examination	School/ College/ University	Subjects	Year of Passing	%age of marks secured/ CGPA
1	Secondary				
2	Sr. Secondary				
3	Graduation				
4	Post Graduation				
5	M.Phil				
6	Others				

(b) Certificate for Qualifying
NET(JRF)/GATE/UGC-CSIR
(NET/JRF)/DBT (JRF)/ICMR
(JRF) (Yes/No):

With Details: _____

(c) Details of the Teaching/ Research Experience (Attach Documentary Evidence (s))

- 1 _____
- 2 _____
- 3 _____

UNDERTAKING

I undertake that all the course work prescribed by the University for Ph.D. Programme shall be successfully completed by me, I shall complete the minimum residency period as required by University. I shall abide by all the rules and regulations of the University as in force from time to time.

Signature of the Research Scholar with Date

RECOMMENDATION OF THE DEAN

Recommended/ Not Recommended for _____
Registration into the Ph.D Programme _____

Signature of the Proposed Supervisor with Date

Signature of the Dean with Date

Signature of the DRC with Date

FEE STRUCTURE FOR PRELIMINARY REGISTRATION

- 1 Preliminary Registration fees (This include the fee of the first year) (₹) 10,000/-
- 2 Fee receipt No. with Date: _____

CHECK LIST

- | | | |
|----|--|----------------------|
| 1 | Document(s) for Date of Birth/ Secondary School Certificate/ Marksheet. | <input type="text"/> |
| 2 | Sr. Secondary School Certificate. | <input type="text"/> |
| 3 | Sr. Secondary Marks Sheet. | <input type="text"/> |
| 4 | Graduation Marks Sheet. | <input type="text"/> |
| 5 | Graduation Degree. | <input type="text"/> |
| 6 | Post Graduation Marks Sheet. | <input type="text"/> |
| 7 | Post Graduation Degree. | <input type="text"/> |
| 8 | M.Phil degree / Marksheet | <input type="text"/> |
| 9 | Certificate for Category. | <input type="text"/> |
| 10 | Certificate for Qualifying NET(JRF)/GATE/UGC-CSIR (NET/JRF)/DBT (JRF)/ICMR (JRF) | <input type="text"/> |
| 11 | If approved for Part Time, copy of N.O.C from concerned Department.(in case of regular employee) | <input type="text"/> |
| 12 | Other Document(s) | <input type="text"/> |

(Signature of the Scholar with Date)

Address: _____

(Signature of the Verifying Officer with Date)



Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, New Delhi-110078
Academic Coordination Branch

FORM FOR ISSUE OF STUDENT IDENTITY CARD

(Important : see notes below)

Name
(Block letters) _____
Father/Husband's Name
(Block letters) _____
Mother's Name
(Block letters) _____
School and Course _____
Enrolment No _____
Semester _____
(Give year, if annual pattern) _____
Type of Course (Regular/Weekend) _____
Date of Birth
(DD/MM/YYYY) _____
Blood Group _____
Name of Person & Phone No. to be
contacted in case of emergency _____
Mark of Identification _____
Residential Address _____
Phone No _____ Mobile _____ Res: _____
Valid upto _____
(for regular duration of course) 31st July _____ (Year)

Paste here recent
passport size photograph
(to be scanned for I.D
Card)

Paste here recent
passport size photograph
(same as above duly
attested by Dean)

UNDERTAKING

I solemnly affirm that the information furnished above is true and correct in all respects. I have not concealed any Information. I realise that if any information furnished here is found to be incorrect / untrue, I shall be liable to action by the University. I agree to abide by the rules and regulation of University. I understand that, if I am found indulging in any act of misbehavior / indiscipline, disciplinary action will be taken against me.

Counter signature of Dean/Nominee
(with date and Seal)

Signature of Student
(with date)

Notes: -

1. Filled- in form is to be submitted at the office of respective Dean.
2. The form must be duly signed and stamped by the respective Dean/ Nominee at the space given above.
(The form will not be accepted without the signature and stamp of Dean/ Nominee).
3. The Form must be filled up in legible handwriting as per instructions above.
4. All the Columns are compulsory.





Guru Gobind Singh Indraprastha University
Sector-16 C, Dwarka, New Delhi-110078
University Information Resource Centre

Identity Card/Membership Form for Students

Latest
stamp size
photo

Name (Block Letters) _____
Father's Name _____
Date of Birth _____
Blood Group _____
Enrolment No. _____
School & Course _____
Date of Admission _____
Duration of Course _____
Correspondence Address _____
Permanent Address _____
Phone No. _____
E-Mail _____

UNDERTAKING

I have read the UIRC rules and agree to abide by them and also agree with records maintained by the UIRC, in respect of issue & return of documents & other related matters. I undertake the following.

1. To pay any dues when demanded by the UIRC as per its rules.
2. That after writing examination of final semester, I will return all the books to UIRC otherwise University reserves the right to withhold my result.
3. To obtain "No Dues/ Clearance Certificate" from UIRC at the time of leaving the University.

Date:

Signature of Applicant

Signature of Dean (with Stamp)

For UIRC Use

Mr./Ms. _____ has been enrolled as member of the UIRC. His/ her membership No. is _____

Librarian

Note: - All Columns are compulsory, submit two photographs (one attach, one paste)



University IT Services Cell
Guru Gobind Singh Indraprastha University
Sector-16 C, Dwarka, Delhi - 110078

Form No: UITTS/F06

INTERNET ACCESS LOGIN FACILITY / CHANGE PASSWORD FORM

Department / School Name

Employee / Student Name

Employee Code / Enrolment
Number

Year of Joining / Admission

Primary Mobile Number

Valid E-Mail Id

Reason for Internet Access
Login / Change of Password

I confirm the following:

1. I have enclosed copy of my University I-Card / Appointment Letter / Admission Slip.
2. I shall not share my User Id / Password to anyone.
3. I shall be fully liable for any legal activities observed through my User id.

Signature of Dean / Supervisor / Branch Head

Employee / Student Signature

Date:

To be filled by UITTS Cell, GGS Indraprastha University

Remarks (If any):

Signature of Head, UITTS Cell

