

**2nd Floor, AU Engineering College Main Block, Andhra University,   
Visakhapatnam – 530003, Andhra Pradesh, INDIA**

**APPLICATION FOR POST DOCTORAL FELLOWSHIP (PDF) – 20\_\_**



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| Advertisement No. | IIPE/DORD/PDF/20\_\_ |  | Affix here recent passport size photograph |
| Applied for | Post-Doctoral Fellowship – 20\_\_ |
| Application Date |  |
| How did you hear about PDF? |  |

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| --- | --- | --- | --- |
| 1. | Name of Candidate (in Block Letters) | : |  |
| 2. | Father’s/Mother’s Name | : |  |
| 3 | Date of Birth (Attach a DOB proof document) |  |  |
| 4. | Email ID | : |  |
| 5. | Mobile Number | : |  |
| 6. | Department Applied for | : |  |
| 7. | Name of the Faculty to work with | : |  |
| 8. | Time required in months to join once selected as PDF | : |  |
| 9. | Details of Ph.D.  1. Date of Award of Ph.D.  2. Title of the Ph.D. Thesis  3. Name of the Institute/University that awarded Ph.D. Degree 4. Name and Address of Guide | : |  |
| 10. | Area of Expertise | : |  |

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| --- | --- |
| 11. Corresponding Address: |  |
| 12. Permanent Address: |  |

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| --- | --- | --- | --- |
| 13. | Nationality | : |  |
| 14. | Gender | : |  |

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| 15. | Tick the appropriate box which you belong to the category\*: | | | | | |
| SC ☐ | ST ☐ | PH ☐ | OBC ☐ | EWS ☐ | UR ☐ |
| \*Please attach a suitable certificate in support of the claim from an appropriate government authority. Except in case of UR | | | | | | |

16. Educational Qualifications (Please attach self-attested copies of the Mark Sheets, Certificates, and CGPA to Percentage conversion formula approved by Institute/University):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Examination  Passed | Degree Name and Branch | College/ Univ./  Institute | Year of passing | % /  Grade | Class/ Division |
| 10th |  |  |  |  |  |
| 10+2 |  |  |  |  |  |
| U.G |  |  |  |  |  |
| P.G |  |  |  |  |  |
| Ph.D. |  |  |  |  |  |

17. Other Qualifications (if any) [Name of qualification, Specialization, Year, Grade]:

|  |  |
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18. Teaching Experience (if any) [Year, Duration, Details of course/module, Class strength]:

|  |  |
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19. Industry Experience (if any): [Year, Duration, Details of Experience]

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20. Research Experience/Fellowship (Post Ph.D.): [Year, Duration, Details of Experience]

|  |  |
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21. Awards/Honours/Prizes/Professional Recognition (if any): [Year, Duration, Details of Experience]

|  |  |
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22. Major Research Achievements: [Year, Details]

|  |  |
| --- | --- |
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23. List of Publications/Patents/Books/Chapters/Reports (Please attach a separate sheet)

For publications

[Name(s) of Author(s) as appeared in the original manuscript, Title of the Paper, Volume and Pages, Year of Publication, Name of the Journal, Name of the Publisher, Indexed in, and Impact Factor]

For patents

[Name(s) of Inventor(s), Patent Title, Applied/Granted, Patent Application Number/Patent Number, Award Date, Country/Agency]

For others

[All necessary information]

24. Contact Information of two Referees:

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Referee 1 | Referee 2 |
| Name | : |  |  |
| Designation | : |  |  |
| Address | : |  |  |
| Land line | : |  |  |
| Mobile Number | : |  |  |
| Email | : |  |  |

25. Research Proposal (600-1000 words):   
Proposals submitted need to be original and plagiarism in any form will not be acceptable

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1. Any other relevant Information : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Attach sheet if necessary)

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27. List of Enclosures: [All enclosures should be self-attested]

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| --- | --- | --- |
| S No. | Item | Number of Sheets |
| 1 | Proof of Age\* |  |
| 2 | List of Publications\* |  |
| 3 | Ph.D. Thesis Title Page and Abstract\* |  |
| 4 | Qualifications: Mark sheets, Certificates, CGPA to Percentage Conversion\* |  |
| 5 | Undertaking Form\* (Duly signed by candidate) |  |
| 6 | Category Certificate\* (Except UR) |  |
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| \* Mandatory attachments | |  |

There are attached sheets along with this application form of 7 pages.

I have carefully read and understood the PDF guidelines, and that all entries in this application as well as attached sheets are true to the best of my knowledge and belief. If any part of the information given is found to be false or incorrect, I shall forfeit the claim to the Post-Doctoral Fellowship at IIPE and will be liable to the disciplinary action

(Signature of the Candidate)  
Place and Date:

Note: Use separate sheet if necessary for any of the above items. Self-attest each of such separate sheet attached.