

ANNA UNIVERSITY TIRUNELVELI

TIRUNELVELI – 627 007

FORM OF APPLICATION FOR RECOGNITION AS Ph.D. SUPERVISOR

1. Name (in Block Letters) :
2. Designation/Official Address :
- Date of Birth :
- Mobile / Phone No. & E-Mail :
3. Qualifications :
4. Area of Specialization :
5. i) Experience (No. of Years) :
- (a) As Lecturer : (From To)
- (b) As Assistant Professor : (From To)
- (c) As Professor : (From To)
- (d) Total Teaching :
- ii) Practical/Industrial Experience : (From To)
6. Membership in Professional Societies :
7. Number of Sponsored Research Projects :
 (as Principal Investigator give details separately)
8. Research Guidance (No. of Thesis guided)
- (a) Master's/M.Phil. Thesis :
- (b) Ph.D. Thesis :
9. Examiner for Ph.D. Thesis :
- (a) Number of the Thesis Evaluated :
- (b) Name of the University / Universities :
10. Are you an approved Supervisor for :
 Ph.D. Programme of any other
 University ? if so provide proof of it

11. Publications (Please attach list of publications and reprints of at least two publications published during last 3 years in National/International Journals/Refereed Conference Proceedings)

(a) Number of Papers in Refereed Journals

i) National Journals :

ii) International Journals :

(b) Number of Papers published in Refereed Conference Proceedings :

(c) Number of Patent(s) filed / obtained :

12. Details of recognition of your Organization : by any other University for Conducting Research

13. Any other information :

Date:

Place: Signature of the Applicant

Recommended/Forwarded

Date:

Signature of the Head of the Institution/ Approved Research Centre/ Affiliated Colleges (with seal) Place:

Encl.: List of Publications/Reprints/Details of Patent(s) filed or obtained. Other Information & Xerox copy of Ph.D. Degree Certificate

(Office Use)

Approved / Not Approved

Authorised Signatory
Director – Research