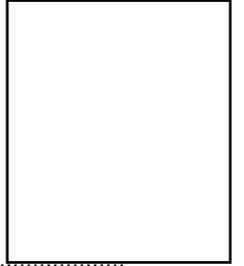




**RAMAKRISHNA MISSION VIVEKANANDA UNIVERSITY**  
**FACULTY OF GENERAL AND ADAPTED PHYSICAL EDUCATION & YOGA**  
 (RKMVU-FGAPeDY)  
**DEGREE OF DOCTOR OF PHILOSOPHY (Ph.D)**  
 (With effect from 2010)



**APPLICATION FOR ADMISSION TO Ph.D DEGREE PROGRAMME**  
**Regular and part time**



|             |  |
|-------------|--|
| <b>Year</b> |  |
|-------------|--|

1. Name of the Applicant (as entered in the degree certificate in capital letters)  
 In English : .....  
 In Tamil : .....
  2. Name of the Father : .....
  3. Name of the Mother : .....
  4. Gender : Male / Female
  5. Date of birth and year : .....
  6. Community : GT / BC / MBC / SC / ST
  7. Nationality : .....
  8. Religion : .....
  9. Address for Communication : .....
- Phone: .....
- Email: .....
- Mobile: .....

10. Academic Qualifications:

| Academic Qualification | Name of the School/College | Board/University | Month & Year of Passing | Subject | % of marks | Class/grade |
|------------------------|----------------------------|------------------|-------------------------|---------|------------|-------------|
| +2                     |                            |                  |                         |         |            |             |
| Bachelor's Degree      |                            |                  |                         |         |            |             |
| Master's Degree        |                            |                  |                         |         |            |             |
| B.P.Ed / BPT           |                            |                  |                         |         |            |             |
| M.P.Ed / MPT           |                            |                  |                         |         |            |             |
| M.Phil                 |                            |                  |                         |         |            |             |

11. Professional/Teaching Experience after qualifying Degree: B.P.Ed./M.P.Ed/M.Phil - BPT / MPT

| No.  | Designation/Nature of Work | Institution | Duration |    | Total duration of service |
|------|----------------------------|-------------|----------|----|---------------------------|
|      |                            |             | From     | To |                           |
| i.   |                            |             |          |    |                           |
| ii.  |                            |             |          |    |                           |
| iii. |                            |             |          |    |                           |
| iv.  |                            |             |          |    |                           |

12. Research experience:

| No.  | Designation<br>JRF/SRF/URF/TRF/Others | Funding Agency | Duration |    | Theme of Research |
|------|---------------------------------------|----------------|----------|----|-------------------|
|      |                                       |                | From     | To |                   |
| i.   |                                       |                |          |    |                   |
| ii.  |                                       |                |          |    |                   |
| iii. |                                       |                |          |    |                   |
| iv.  |                                       |                |          |    |                   |

13. Whether the applicant has published articles / research papers / books? If so, enclose Xerox copies. :

14. Awards, medals, prizes and honours achieved by the applicant :

15. Any other particulars the applicant would like to present for the consideration of the authorities :

16. Whether the applicant has previously registered for Ph.D/M.Phil. course etc., if so, give details. :

17. a. Title of the proposed proposal :

b. Broad Theme of the Proposed Research :

c. Submit a brief proposal with guide's signature :

18. Declaration by the applicant: I declare that I will abide by the rules and regulations of Ph.D programme

Place:

Signature

Date:

|     |  |                                       |
|-----|--|---------------------------------------|
| 19. | Name, Designation and Institution where the proposed research supervisor is employed | Residential address for communication |
|     |  | Phone:<br>Email:<br>Mobile            |

20. Whether the Supervisor is recognized: If so, state the No. and date of communication through which he/she is recognized as a Supervisor for Ph.D programme. (Xerox copy of the communication should be enclosed) :

21. Whether the candidate is related to the supervisor, if so, furnish the nature of relationship :

22. Supervisor's comments about the suitability of the applicant for research :

23. Particulars of Ph.D candidate already Registered in Ramakrishna Mission Vivekananda University, Faculty of General and Adapted Physical Education & Yoga under the supervision of the guide.

| S. No. | Name of the candidate | Physical Education / Interdisciplinary | Date of registration | Tentative date of submission of dissertation |
|--------|-----------------------|--|----------------------|--|
| 1      |                       |  |                      |  |
| 2      |                       |  |                      |  |
| 3      |                       |  |                      |  |
| 4      |                       |  |                      |  |
| 5      |                       |  |                      |  |
| 6      |                       |  |                      |  |
| 7      |                       |  |                      |  |

24. Particulars of Ph.D candidates already Registered in Other Universities under the Supervision of the guide.

| S. No. | Name of the Candidate | Full-time / Part-time | Physical Education/ Interdisciplinary | Registration | Tentative date of submission of dissertation |
|--------|-----------------------|-----------------------|---------------------------------------|--------------|--|
| 1      |                       |                       |                                       |              |  |
| 2      |                       |                       |                                       |              |  |
| 3      |                       |                       |                                       |              |  |
| 4      |                       |                       |                                       |              |  |

Signature of the Supervisor  
with Seal:

24. Consent of the Head of Institution where the candidate is employed for permission to do research with signature and seal

Signature of the head of Institution  
with Seal:

**Note:** Cost of application ₹ 500.00. (DD for ₹ 500.00 should be taken in favour of "RKMVU-FGAPeDY" payable at Coimbatore)  
Send the filled in application form to the following address: **The Dean, Faculty of General & Adapted Physical Education and Yoga, Ramakrishna Mission Vivekananda University, SRKV Post, Periyanaickenpalayam, Coimbatore, Tamilnadu - 641 020, India.**