



BHARATHIDASAN UNIVERSITY, TIRUCHIRAPPALLI – 620 024.

RESEARCH ADVISERSHIP FOR M.PHIL. PROGRAMME

1. Name :
2. Date of Birth & Age :
3. Designation & Address :
4. Subject/Discipline in which recognition is sought :
5. Details of M.Phil./Ph.D. Degree obtained :
6. Whether already recognised by this University as a research supervisor in any other discipline/subject (If yes, furnish complete details) :
7. Whether you obtained the Qualification of approval for the post of Lecturer, from the University (If yes, copy of the qualification of approval should be enclosed) :

Degree	University	Subject/Discipline	Reg. No/Year

8. Area of Specialisation :
9. Total No. of papers & books published :
10. Teaching experience : P.G. -
U.G. -
11. Any other relevant information :

DECLARATION

The information furnished above are correct to the best of my knowledge.

Place :

Date :

Signature of the Candidate

**Signature of the Head of the
Department with seal**

**Signature of the Principal/Head of the
Institution with seal**

Enclosures required:

1. Copy of the M.Phil/Ph.D. Degree
2. Original Service Certificate

SERVICE CERTIFICATE

This is to certify that Mr./Ms./Dr. _____
_____ is working in the college as _____ in
the Department of _____. He/She is handling
UG/PG classes in the Department for ____ Years ____ months
(From _____ to till date).

**Signature of the Principal
with College seal**

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