राष्ट्रीय प्रौद्योगिकी संस्थान सिक्किम



NATIONAL INSTITUTE OF TECHNOLOGY SIKKIM

(AN INSTITUTION OF NATIONAL IMPORTANCE, GOVT. OF INDIA) **Form-IV**Barfung Block, Ravangla, South Sikkim-737139

Form-IV

Enrolment Form for PhD Programme

Recent passport size photograph (Not older than 6 months)

For Office use only

Category of Research Scholar:		
Name:		
Date of Enrolment:		
Enrolment No:		
**Registration No.:		
Date of Registration:		
(Dean I/c, Academic affairs)		
* After successful completion of comprehensive.		



राष्ट्रीय प्रौद्योगिकी संस्थान सिक्किम

NATIONAL INSTITUTE OF TECHNOLOGY SIKKIM

(AN INSTITUTION OF NATIONAL IMPORTANCE, GOVT. OF INDIA)
Barfung Block, Ravangla, South Sikkim-737139

Form-IV

	8 1 8 1 7 1 1 8 1 7					
1.	Department/Centre applied for:					
2.	Name of the Candidate (Full Name with Capital Letters): Mr./Ms					
3. ((a) Roll No.:					
	(b) Registration No(After successful completion of comprehensive.):					
4.	Date of enrolment in PhD programme:					
5.	Father's/Mather's/Spouse's Name:					
6.	Date of Birth:7.	Nationality:				
8. (Category code of Research Scholar (Tick as app 05/PT-06/PT-07/PT-08/.	propriate): FT-01/FT-02/FT-03/FT-04/PT-				
9. I	Marital Status: Married/Unmarried:	_, 10. Gender: Male/Female/Other:				
11.	Category: SC/ST/OBC/OPEN:, Re	eligion:				
12.	Highest Qualification:					
13.	13. GATE/ NET ((Tick as appropriate):Score: Rank:					
14. Address:						
	Permanent Address	Corresponding Address				
	Tobile: none(Landline):	Mobile: Phone(Landline):				



राष्ट्रीयप्रौद्योगिकीसंस्थानसिक्किम

NATIONAL INSTITUTE OF TECHNOLOGY SIKKIM

(AN INSTITUTION OF NATIONAL IMPORTANCE, GOVT. OF INDIA) **Form-IV**Barfung Block, Ravangla, South Sikkim-737139

Name of the Supervisor(s)	Designation & Name of the	Signature
-		
be enclosed.]	i certificate from his/her histitute/	Organization must
be from NIT Sikkim. For supervisor(s) fr willingness certificate and a no-objection	_	
19.Proposed Supervisor(s) & their affilia	-	•
18. Publication, if any (Separate sheet ma	y be used):	
17.Previous research experience, if any:		
(Write up to be enclosed)		
TOPIC/AREA:	·	
16. Proposed Research Area [A copy of including topic/ area to be attached with		earch work
15. No Objection Certificate/Relieving co	ertificate (from Employer):	

Name of the Supervisor(s) (Will be decided later, but not later than the comprehensive test.)	Designation & Name of the Organization	Signature