



ಶರಣಬಸವ
SHARNBASVA



ವಿಶ್ವವಿದ್ಯಾಲಯ
UNIVERSITY



A State Private University approved by Govt. of Karnataka vide Notification No. ED 144 URC 2016 dated 29-07-2017
Recognised by UGC under Section 2f vide No. F.8-29/2017 (CPP-I/PU), dated 20-12-2017 & AICTE, CoA, PCI New Delhi

Application Form for Ph. D. - 2026

Application Number: (to be filled by the office)	
Faculty Applied for: Engg & Tech / Science & Tech/Business Studies / Languages/etc	
Program Type:	Full Time / Part Time
Department Applied For:	
Registration Type:	Fresh Registration/Re-Registration
Name of Candidate (in Full) (As per Master Degree Certificates)	
Address for Communication	
Contact Phone No.	
Email id	
Date of birth	
Gender:	Nationality: Indian / Foreign
Aadhaar No.	Category

Education Qualification Details

Category (Full Time/ Part Time)	Name of the Degree	Name of the University	Specialization/ Branch	% of Marks	Year of Pass

No. of Years of Experience	Teaching		Research		Industry	
Number of Publications	Research Papers		Patents		Awards	



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Whether passed UGC/CSIR (NET) (JRF)/SLET/K- SET/GRE /GATE?	Yes / No If yes, specify the exam passed (Enclose attested copy of the certificate)
Area of Research Interest	
Particulars of the Entrance Examination Fee Paid	Amount Rs. Bank Transaction No/UTR:

Note: Enclose two passport size photographs along with necessary documents and Bank Transaction Detail for the fee payment.

Candidates can choose the three supervisors

Sl. No.	Name of the Research Supervisor	Department	Designation	Research Area
1.				
2.				
3.				

Place:

Date:

Signature of the Candidate

No Objection Certificate of the Organization

This is to certify that the Organization has no objection in recommending the candidature of our employee for carrying out research for his/her Ph. D. at SHARNBASVA UNIVERSITY, KALABURAGI on part time/full time basis. The information provided by the candidate is found correct as per our records.

SIGNATURE OF THE PRINCIPAL/
HEAD OF THE ORGANIZATION WITH SEAL

Declaration by the Candidate



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I _____

hereby certify that all the information given by me are true to the best of my knowledge. In the event of any information being found incorrect or misleading, my candidature shall be liable to cancelled by the University at any time and I shall not be entitled for refund of any fee paid by me to the University.

I have carefully studied the regulations governing the degree of Doctor of Philosophy (Ph. D.) - 2025 of Sharnbasva University, Kalaburagi.

Date:

Signature of the Candidate

Check List

Enclose the attested photocopies of the following in the order specified below, before sending the application

- All degree Certificates and Marks cards of the Candidate.
- Category certificate of candidates belonging to SC/ST/Cat-I/ and any other as applicable.
- Test Score Card along with Admission ticket in support of clearance of UGC-CSIR, JRF, etc.
- Medical Certificate in respect of disability claim.
- In case the candidate is possessing degree from Foreign University, the Equivalence Certificate issued by the Association of Indian Universities (AIU).
- Photocopy of Aadhaar Card.
- Paper Published Details.
- Independent R & D activities taken in the department if any.
- Online payment of Rs.3000/- should be paid towards Application and Processing Fee to the following account details

Account Name: CHANCELLOR FINANCE OFFICER RESEARCH SHARNBASVA UNIVERSITY KALABURAGI

Account No: 510101006937674

IFSC Code: UBIN0920932

Branch: Vidya Nagar Branch, Kalaburagi

Bank: Union Bank of India



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HALL TICKET

Name of The Candidate: _____

Address: _____

Program Applied for: _____

Stream Applied for: _____

Affix Passport
Size Photo
Here

Signature of the Candidate

For office use only

Seat Number: _____ Date of SUK-ETR: _____

Test Center _____ Reporting Time: _____

Signature of the Registrar

- Photo ID Proof with official address is mandatory to enter the exam hall.
- Candidate must read the instructions provided in the Question Paper before the commencement of examination.