



University School of Information, Communication & Technology
Guru Gobind Singh Indraprastha University
 (a state university established by the Govt. of NCT of Delhi)
 Sector 16C, Dwarka-New Delhi-110078



F. No. GGSIPU/USICT/Ph.D./Adm./2024-25/22748^L

Dated: 05/06/2024

RESULT OF PhD ADMISSION 2024-25 IN USIC&T

Merit list of provisionally selected candidates for PhD programme of USIC&T for the disciplines of CSE/IT/CA (PET Code-211), ECE (PET Code-212), and MAE (PET Code-213), duly approved by SRC is given below

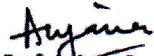
Sr. No.	Application No	Applicant Name	Gender	Category	Discipline	Potential Supervisor*
CSE/IT/CA (PET Code-211)						
1.	211241000186	Sanchi Kalra Dang	Female	General	CSE	Prof. Udayan Ghose, Dr. Reena Gupta Dr. Jaspreeti Singh
2.	211241000146	Ashu Goyal	Female	General	IT	Dr. Kamaldeep Kaur Dr. Priyanka Bhutani Dr. Jaspreeti Singh
3.	211241000377	Bhawna Bhardwaj	Female	General	IT	Prof. Bharti Suri Prof. Amit Prakash Singh Prof. Sanjay Kumar Malik Dr. Reena Gupta Dr. Priyanka Bhutani Dr. Jaspreeti Singh
4.	211241000381	Vivek Tatarwal	Female	General	CSE	Prof. Anju Saha Dr. Jaspreeti Singh
5.	211241000367	Heena Kwatra	Female	General	CSE	Prof. Navin Rajpal, Prof. Bharti Suri Prof. Amit Prakash Singh Prof. Sanjay Kumar Malik Dr. Sartaj Singh Sodhi Dr. Anuradha Chug Dr. Priyanka Bhutani Dr. Jaspreeti Singh
6.	211241000318	Arushi Gupta	Female	General	IT	Prof. Anjana Gosain Prof. Udayan Ghose Dr. Priyanka Bhutani Dr. Jaspreeti Singh
7.	211241000345	Prashant Verma	Male	General	IT	Prof. Navin Rajpal, Prof. Arvinder Kaur Prof. Sanjay Kumar Malik Prof. Rinkaj Goyal Dr. Jyotsna Yadav Dr. Kamaldeep Kaur Dr. Jaspreeti Singh
8.	211241000109	Ashish Shrivastava	Male	General	CSE	Prof. Arvinder Kaur, Prof. Bharti Suri Prof. Amit Prakash Singh Prof. Ravindra Kr. Purwar Prof. V. P. Vishwakarma Prof. Rinkaj Goyal Dr. Jyotsna Yadav Dr. Reena Gupta Dr. M. Bala Krishna Dr. Jaspreeti Singh
9.	211241000095	Rishu Kumar	Male	General-EWS	CSE	Prof. Pravin Chandra Dr. Jyotsna Yadav Dr. Reena Gupta
ECE (PET Code-212)						
10.	212241000007	Anuj Kumar	Male	General	ECE	Dr. Chakresh Kumar
11.	212241000027	Neha	Female	General	ECE	Dr. Chakresh Kumar
12.	212241000014	Ruchita Gupta	Female	General	ECE	Prof. Vandana Nath Dr. Mansi Jhamb
MAE (PET Code-213)						
13.	213241000004	Yashpal Chopra	Male	Schedule Caste (SC)	MAE	Prof. Pushpendra S. Bharti

* The candidates shall be allocated supervisors from among the Potential Supervisors shown against their names. The admission shall be granted on the basis of merit and choice (by candidate) and availability of slot for admission under the sought supervisor at the time of admission.

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The selected candidates are required to report for allotment of supervisor and registration process on 11th June, 2024 in EFC-315, E-Block at 10:30am with following documents

1. One set of duly filled Registration Form (attached)
2. One set of educational qualification documents (self-attested copy of Master's degree/Mark Sheet/ Provisional Certificate)
3. Self-attested copy of the other relevant documents under which any exemption/relaxation has been claimed, (if applicable).
4. Category certificate (SC/ST/PwD/EWS)
5. Original Copy of No objection Certificate from employer, if employed. (Please ignore if already submitted at the time of interview)
6. Identity card form (Attached)
7. A Demand Draft of Rs. 60,500/- In favour of Registrar, Guru Gobind Singh Indraprastha University payable at Delhi
8. Other documents, if any, as per the Check list (attached).


Prof. Anjana Gosain
Dean, USIC&T

Copy to:

1. Director, Research & Consultancy, GGS IP University
2. Controller of Finance, GGS IP University
3. In-charge, UITS with the request to upload the same on the University website
4. Guard File


Prof. Vandana Nath
PhD Coordinator, USIC&T



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

Sec-16-C, Dwarka Campus, Delhi-110 078

Website: <http://gu.ac.in>

OFFICE OF THE DIRECTOR (RESEARCH & DEVELOPMENT CELL)

APPLICATION FORM FOR REGISTRATION IN THE Ph.D. PROGRAMME

1 Academic Session: _____

2 Full Time: Part Time:

3 Roll No. (For Office use only): _____

4 Name of the Research Scholar (in Capital Letters): _____

5 Discipline: _____

6 Name of the School/Centre: _____

7 Name of the Supervisor: _____

8 Address for Correspondence: _____

9 E-Mail Id: _____

10 Contact No. _____

11 Father's/ Husband's Name: _____

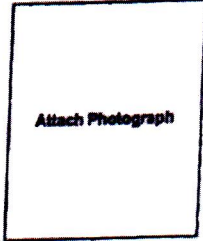
12 Mother's Name: _____

13 Date of Birth:

Day		Month		Year			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

14 Category: Gen/ O.B.C.: SC: ST: PWD: Male/ Female:

15 Details of the Academic Qualifications & Experience:



(a) Academic Qualifications (Attach Documentary Evidence(s)):

S. No.	Examination	School/ College/ University	Subjects	Year of Passing	%age of marks secured/ CGPA
1	Secondary				
2	Sr. Secondary				
3	Graduation				
4	Post Graduation				
5	M.Phil				
6	Others				

(b) Certificate for Qualifying
NET(JRF)/GATE/UGC-CSIR
(NET/JRF)/DBT (JRF)/ICMR
(JRF) (Yes/No):

With Details: _____

(c) Details of the Teaching/ Research Experience if any (Attach Documentary Evidence (a))

- 1 _____
- 2 _____
- 3 _____

UNDERTAKING

I undertake that all the course work prescribed by the University for Ph.D. Programme shall be successfully completed by me, I shall complete the minimum residency period as required by University. I shall abide by all the rules and regulations of the University as in force from time to time.

Signature of the Research Scholar with Date

RECOMMENDATION OF THE DEAN / DIRECTOR

Recommended/ Not Recommended for _____
Registration into the Ph.D Programme

Name of the Ph.D Supervisor allotted : _____

Signature of the Dean/Director with Date

TOTAL FEE PAYBLE AT THE TIME OF ADMISSION

- 1 Fees Paid _____
- 2 Mode / Proof of submission of fee with details: _____



Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, New Delhi-110078
Academic Coordination Branch

FORM FOR ISSUE OF STUDENT IDENTITY CARD
 (Instruction : see notes below)

Name
(Block letters) _____
 Father/Husband's Name
(Block letters) _____
 Mother's Name
(Block letters) _____
 School and Course _____
 Enrolment No _____
 Semester _____
 (Give year, if annual pattern) _____
 Type of Course (Regular/Weekend) _____
 Date of Birth
(DD/MM/YYYY) _____
 Blood Group _____
 Name of Person & Phone No. to be
 contacted in case of emergency _____
 Mark of Identification _____
 Residential Address _____
 Phone No _____
 Mobile _____ Res: _____
 Valid upto _____
 (for regular duration of course) 31st July _____ (Year)

Paste here recent
 passport size photograph
 (to be scanned for LD
 Card)

Paste here recent
 passport size photograph
 (same as above duly
 attested by Dean)

UNDERTAKING

I solemnly affirm that the information furnished above is true and correct in all respects. I have not concealed any information. I realize that if any information furnished here is found to be incorrect / untrue, I shall be liable to action by the University. I agree to abide by the rules and regulation of University. I understand that, if I am found indulging in any act of misbehavior / indiscipline, disciplinary action will be taken against me.

Counter signature of Dean/Nominee
 (with date and Seal)

Signature of Student
 (with date)

Notes: -

1. Filled-in form is to be submitted at the office of respective Dean.
2. The form must be duly signed and stamped by the respective Dean/ Nominee at the space given above.
 (The form will not be accepted without the signature and stamp of Dean/ Nominee).
3. The Form must be filled up in legible handwriting as per instructions above.
4. All the Columns are compulsory.

CHECK LIST (Admission)

- | | | |
|----|--|--------------------------|
| 1 | Document(s) for Date of Birth/ Secondary School Certificate/ Marksheet | <input type="checkbox"/> |
| 2 | Sr. Secondary School Certificate | <input type="checkbox"/> |
| 3 | Sr. Secondary Marks Sheet | <input type="checkbox"/> |
| 4 | Graduation Marks Sheet | <input type="checkbox"/> |
| 5 | Graduation Degree | <input type="checkbox"/> |
| 6 | Post Graduation Marks Sheet | <input type="checkbox"/> |
| 7 | Post Graduation Degree | <input type="checkbox"/> |
| 8 | M.Phil degree / Marksheet | <input type="checkbox"/> |
| 9 | Certificate for Category | <input type="checkbox"/> |
| 10 | Certificate for Qualifying NET(JRF)/GATE/UGC-CSIR (NET/JRF)/DBT (JRF)/ICMR (JRF) | <input type="checkbox"/> |
| 11 | If approved for Part Time, copy of N.O.C from concerned Department (in case of regular employee) | <input type="checkbox"/> |
| 12 | Other Document(s) | <input type="checkbox"/> |

(Signature of the Scholar with Date)

Address: _____

(Signature of the Verifying Officer with Date)