



राष्ट्रीय प्रौद्योगिकी संस्थान दिल्ली

NATIONAL INSTITUTE OF TECHNOLOGY DELHI

(शिक्षा मंत्रालय, भारत सरकार के अधीन एक स्वायत्त संस्थान)

(An autonomous Institute under the aegis of Ministry of Education, Govt. of India)

Plot No. FA7, Zone P1, GT Karnal Road, Delhi-110036, INDIA

दूरभाष/Tele: +9111-33861000, 1001, 1005 फैक्स/ Fax: +9111-27787503

वेबसाइट/Website: www.nitdelhi.ac.in

REGISTRATION FORM FOR PhD SCHOLARS

For office use:

Enrollment No. / Roll No.	
Registration No.:	
Registration Date:	
Institute Email ID:@nitdelhi.ac.in

Paste recent
passport size Self
Attested
photograph

Category of admission (tick any one only)

Full-Time with Institute Fellowship

Full-Time with Own Fellowship

Full-Time with Self-Finance

Full-Time with Visvesvaraya PhD scheme Fellowship

Part-Time

1. Department : _____

2. *Name (in English)
(In Block Letter) : _____

*Name (हिंदी में) : _____

(* The Name should be filled in Hindi & English both. The same will be used for printing degree/
grade sheets & other certificates. Therefore, the students are advised to fill it carefully)

Date of Birth (DD/MM/YYYY) : _____

Place of Birth : _____

Blood Group : _____

Identification Mark : _____

Recent Contact No. : _____

Alternate Contact No. : _____

Email ID : _____

Category to which the Scholar belongs: _____

[General/SC/ST/OBC/PwD/NcL]

3. **Nationality** : _____
Mother Tongue : _____
Gender : _____
Religion : _____

State / UT to which the student belongs: _____

Place of residence of the student: Rural / Urban (Tick whichever is applicable) Near Railway Station from residence: _____

4. a) **Father's name (in English)** : _____
Father's name (in Hindi) : _____
Father's Occupation : _____
Father's Recent Contact No / Mobile No.: _____
Father's Email ID : _____
- b) **Mother's name** : _____
Mother's occupation : _____
Mother's Recent Contact No.: _____
Mother's Email ID : _____
- c) **Name of local Guardian** : _____
Occupation of local Guardian: _____
Recent Contact No. : _____
Email of local Guardian : _____
- d) **Annual income of father/ family:** _____
(in Indian Rupees) (per year)

5. a) **Permanent address of the student:** _____

_____ **Pin Code:** _____
Police Station: _____ **Post Office:** _____
State/UT: _____ **Country:** _____
- b) **Complete address of correspondence of the student:** _____

_____ **Pin Code:** _____
Police Station: _____ **Post Office:** _____
State/UT: _____ **Country:** _____

c) Complete address of local guardian (if any): _____

 _____ Pin Code: _____
 Police Station: _____ Post Office: _____
 State/UT: _____ Country: _____
 Phone No. (Residence) ISD / STD Code : _____ Phone: _____

6. a) EPIC Card No.: _____
 b) Aadhar Card No.: _____
 c) PAN Card No.: _____
 d) Passport No. : _____ Issuing Authority : _____
 Valid From : _____ Valid upto : _____

7. Educational Qualification:

Examination passed	Name of exam/ degree	Branch/ Subjects	Institute/ University	Year of passing	Percentage of marks/ CGPA and Division
10 th					
10 + 2					
Diploma					
Bachelors Degree					
Master's Degree					
Any other Exam passed (GATE/NET) etc.					

*(Attach attested photocopies of each)

8. Experience :**

S. No.	Organization	Duration		Designation	Nature of Work
		From	To		

*** (Attach attested photocopies of each)

Declaration

I hereby declare that all the information given above is correct and true to the best of my knowledge and belief and nothing has been concealed therein. If any wrong information is found on my part, I shall be liable to face disciplinary action.

(Signature of Scholar)

Date: _____

UNDERTAKING BY THE SCHOLAR

I, _____ (name of the scholar) undertake to produce the pass certificate/ marksheet/ degree of _____ / _____ (document name) related to my admission to Ph.D. programme at National Institute of Technology Delhi by/...../..... (within one month at the date of reporting) failing to which my admission will be automatically and summarily cancelled without showing any reason thereof and all fees paid by me will be forfeited.

Counter signature by Parent/ Guardian

Full Signature of the research scholar

Name : _____

Name of the research scholar: _____

Date: _____

Date : _____



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Undertaking Form for claiming House Rent Allowance (HRA) for PhD Students

Name :- _____
Enrollment No. :- _____
Department :- _____
Date of First Registration :- _____
Email ID :- _____
Contact No:- Mobile :- _____
Landline :- _____

Details of Accommodation	Full Address of the Rented Accommodation House: -
	Date of Occupying the Rented House:
	Amount of monthly rent being Paid/Claimed:

Undertaking: -

1. I undertake following from the date of my first registration in NIT Delhi.
2. I am living in a rented house situated within municipal limits of _____ (Name of city/Town) and incurring some expenditure or rent/contributing towards rent.
3. The portion of accommodation in respect of which house rent allowance is claimed has not been sub-let/has been sub-let and the monthly rent which is received is Rs. _____ per month.
4. I am Living in a house situated within municipal limits of _____ (Name of city/Town) and owned by me/my wife/husband/ children/ father/mother in which I am co-partner and pay/contributing towards house or property tax or maintenance of house.
5. I am not living in the government accommodation provided by the Central Government, State Government or Autonomous Public Undertaking or Body or Corporation or Semi Government organization such as Municipalities etc. to my wife/husband/ children/father/mother/brother/sister.
6. I am not living in government accommodation which has been allotted to another government servant.
7. I will inform you about any change in accommodation / address to the institute immediately.
8. I will submit to a similar undertaking whenever I shift my residence.

Date:-

Place:-

Signature of the Student: _____