



Application No (to be filled by office). :

**INDIAN INSTITUTE OF SCIENCE EDUCATION AND RESEARCH
(IISER) THIRUVANANTHAPURAM**

APPLICATION FORM FOR ADMISSION TO Ph.D. PROGRAM August 2010

1. Name _____

Affix here an
attested passport
size recent
photograph

2. Broad Discipline (tick whichever applicable):

Biological Sciences/ Chemical Sciences/
Mathematical Sciences/Physical Sciences

3. Address for correspondence: _____

_____ Pin _____

E-mail _____

Telephone No. _____ Mobile (if any) _____

4. Date of Birth (DD-MM-YY) (attach proof) _____

5. Whether you belong to: SC/ST (attach proof)

6. Qualifying Degree (Mention if final results are awaited) _____

University _____ College _____

Year of passing _____

% / GPA (out of _____) _____ Class /Grade _____

*Govt. Employed Candidates must attach a No Objection Certificate with the application form.

7. **Details of academic record** (Attested copies of mark sheets/certificates to be enclosed):

Examination	Name of Board/University	Year of passing	Subjects	% of marks/ GPA obtained	Remarks /Distinction /Division
Secondary					
Higher Secondary					
B. Sc. (Specialization)					
M. Sc. (Specialization)					
National Qualifying Examination (UGC-JRF/ CSIR-JRF/ICMR-JRF /DBT- JRF/GATE/JEST/NBHM)					

8. Area of interest along with a statement of purpose and research experience (if any) in less than 150 words.

9. Give names of at least two teachers who will act as referees (including their addresses, phone numbers and email contact details). Please ask two of your teachers to complete the attached referee form.

(A)

(B)

10. Please describe any previous research experience briefly.

11. Name of Father/Guardian/person to be contacted in case of emergency, with address, telephone No. etc.

12. Declaration of the Applicant:

I hereby declare that all the particulars furnished are correct. I understand that my association direct or indirect with any lawful organization, is forbidden. I am aware that any incorrect information may lead to cancellation of my admission/selection. If selected, I promise to abide by the rules and regulation of the Institute.

Date:

Place:

(Signature of the candidate)

The completed application along with Demand Draft for Rs.200/-(Rs.100/- for SC/ST) drawn in favour of the Registrar, Indian Institute of Science Education and Research, Thiruvananthapuram should reach the following address before **29th April, 2010**:

The Chairman

Graduate Admissions Committee

Indian Institute of Science Education and Research Thiruvananthapuram

CET Campus

Thiruvananthapuram – 695016

REFEREE REPORT

Ph.D. Program August 2010

CONFIDENTIAL

Please give your assessment of the candidate, who has applied to the Ph.D. program in IISER-TVM. Your evaluation is essential for us to judge the suitability of the candidate. **Please ensure that you seal this Report in an envelope and sign across the top and bottom flaps of the envelope. It should then be given to the candidate to be sent along with the application form.**

Full name of the applicant: Mr./Ms. _____

How long have you known the applicant? _____ year(s).

In what capacity? as an undergraduate student as a post graduate student

in any other capacity (please specify)

How would you assess the candidate? The percentages refer to the sample of all students with similar qualifications known to you.

Attribute	Percentage				
	Belongs to top	5%	10%	25%	50%
Creativity					
Knowledge in the subject					
Aptitude					
Communication Skill					
Perseverance					

State the applicant's strong qualities:

Even the best candidates may have some short comings. State the applicant's weak points if any:

Are you recommending more than one student to IISER-TVM this year? If so, please rank them in order of merit.

i) _____

ii) _____

iii) _____

Given an opportunity, would you like to have the applicant as your own research student?

Yes No, because _____

Do you feel that his / her grades (or marks) correctly represent his / her level of ability?

Yes No, he / she should have got higher / lower marks.

Is there any special topic that you think the applicant knows particularly well?

Any general remarks you would like to make

Date: _____ Signature: _____

Your name: _____

Designation: _____

Address: _____

Phone: _____ Fax No.: _____

E-mail: _____