

To  
The Registrar, BESUS  
Through Supervisor(s) and Concerned HoD



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**BENGAL ENGINEERING AND SCIENCE UNIVERSITY, SHIBPUR  
P.O. BOTANIC GARDEN, DIST-HOWRAH-711 103**

**Application Form for Registration to PhD Programme**

DD No./Date/Issuing Bank/Cash:.....

1. Department/School/Centre to which registration is sought:.....

2. PhD Enrolment No:..... Date of Enrolment: .....

3. Name (Block Letters): .....

4. Date of Birth: .....(dd/mm/yyyy)

5. Name of Father/Mother/Spouse:.....

6. Permanent Address: .....

..... Pin.....

7. Address for Communication: .....

..... Pin.....

8. Telephone/Mobile No: .....

9. E-mail Address:.....

10. Category (Please Tick):    General/SC/ST/OBC/PC

11. Name of Supervisor(s) with designation and address (with contact numbers)

I).....  
.....  
.....

II).....  
.....  
.....

12. Academic Qualification (Secondary/Class 10 onwards)

Name of Exam Passed	Board/Council/University	Year of Passing	Marks Obtained Full Marks /Grade Point	Percentage (%)

I do, hereby declare that the information furnished above are true to the best of my knowledge and belief. My candidature for registration to the PhD programme of BESU is liable to be cancelled if any of the information is found to be untrue.

Date:

Place:

Signature of the Candidate

N.B:

1. Attach self certified Xerox copies of all relevant mark sheets and certificates.
2. Attach self certified Xerox copy of the PhD Course work examination.
3. Attach Recommendation of the Dean of the concerned faculty council for Registration to PhD programme.
4. Attach Registration Fess payment receipt in Original
5. Keep a Xerox copy of the application form and the Payment receipt for future reference.