

**UNIVERSITY SCHOOL OF LAW AND LEGAL STUDIES
GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY**

Ref: GGSIPU/Ph.D/ USLLS/2021/

Dated: 22-12-2021


Subject: List of Selected candidates for admission into Ph.D Programme (USLLS) for the Academic Session 2021-2022.


The USLLS Ph.D admission Committee and Competent Authority has approved the following candidates for admission into Ph.D Programme (USLLS) for the Academic Session 2021-2022.

S.NO	NAME OF CANDIDATES	APPLICATION No	CATEGORY	FULL TIME/ PART TIME	SUPERVISOR
1.	CHAHAT ABROL	301218800207	GEN	FT/JRF	Prof. Lisa P. Lukose
2.	RACHITA AGRAWAL	301218800270	GEN	FT	Prof. A. P. Singh
3.	FASEEHA KHATOON	301218800168	GEN	FT	Prof. Shivani Goswami
4.	HARSHITA CHOUDHARY	301218800049	GEN	FT/JRF	Prof. Shivani Goswami
5.	ROHAN MEHROTRA	301218800053	GEN	PT	Prof. Queeny Pradhan
6.	KAMAL BENIWAL	301218800014	SC	FT	Dr. Rakesh Handa
7.	MOHIT TANWAR	301218800016	GEN	FT	Dr. Zubair Khan
8.	SHIVANI LAHOTI	301218800293	GEN	FT	Dr. Vandana Singh
9.	UDHAYA KARTHIKA	301218800269	GEN	FT	Dr. M. Sakthivel
10.	GOPIKA S KUMAR	301218800267	GEN	FT	Prof. Lisa P. Lukose
11.	SHIREEN SINGH	301218800015	GEN	FT	Dr. Zubair Khan
12.	PRAGYA GUPTA	301218800018	GEN	FT	Dr. Ravinder Kumar
13.	NARESH SINGH	301218800086	SC	PT	Dr. Kavita Solanki
14.	SHREYA MAHAJAN	301218800190	GEN	FT	Dr. Rakesh Kumar
15.	ANINDYA PROSAD KONAR	301218800158	GEN	FT	Dr. Kavita Solanki
16.	SONAKSHI KASHYAP	30121880025	GEN	FT/JRF	Dr. Rakesh Kumar
17.	SHABANA KHAN	301218800151	GEN	FT	Dr. Upma Gautam

The above candidates are required to report with the fee slip at USLLS office (Room No- 206, C- Block 2nd floor GGSIPU University, Sector-16C, Dwarka, New Delhi – 110078) at earliest (latest by 27-12-2021) for document submission. The Candidates shall bring the following documents:

1. Fee of Rs.10,000/- (Bank Challan/DD in favour of Registrar Guru Gobind Indraprastha University payable at Delhi)
2. One Copy of the dully filled- in admission form attached with this notice:
3. Six Passport size photograph
4. One set of all educational qualification documents/ certificates (self attasted copy all documents) and No- objection certificate (for part- time students if not submitted earlier.)
5. Bring all relevant original documents also for verification


(Dr. Ravinder Kumar)
Ph.D Coordinator, USLLS


(Prof. Amar Pal Singh)
Dean, USLLS

Dean
University School of Law and Legal Studies
Guru Gobind Singh Indraprastha University
Sector-16C, Dwarka, New Delhi-110078

Copy to:

1. Head UITS, Please upload the notice on University website.
2. Copy to DRC for information

Dispatch/Diary No. 9411/USLLS/2021
22/12/2021



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

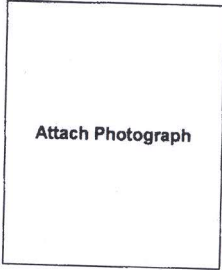
Sec-16-C, Dwarka Campus, Delhi-110 078

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

OFFICE OF THE DIRECTOR (RESEARCH & CONSULTANCY)

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: _____
- 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
- 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 (Attach Documentary Evidence (s))

- 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

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

Signature of the Proposed Supervisor with Date

Signature of the Dean with Date

Signature of the DRC with Date

FEE STRUCTURE FOR PRELIMINARY REGISTRATION

1 Preliminary Registration fees (This include the fee of the first year) (₹) 10,000/-

2 Fee receipt No. with Date: _____

CHECK LIST

- | | | |
|----|--|--------------------------|
| 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)



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

FORM FOR ISSUE OF STUDENT IDENTITY CARD

(Important : 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 I.D
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 realise 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.