



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

"A State University Established by the Govt. of NCT of Delhi"

University School of Environment Management

Sector 16C, Dwarka, New Delhi – 110078



Notice

GGSIU/USEM/Ph.D/2025/

Dated: 19th June, 2025

Subject: List of selected candidates for admission into Ph.D programme in the discipline of Environmental Science in University School of Environment Management (USEM) in the Academic Session 2025-26.

The Ph.D Admission Committee (2025) duly approved by the Competent Authority conducted interviews for Ph. D candidates (including International Candidate) for the year 2025 on 10th June, 2025 & 18th June, 2025 in the University School of Environment Management and the following candidates are selected:


S.No.	Application No.	Name of the Candidate	Category	Full time/ Parttime	Name of the Supervisor
1	240520375419	Antara Pathak	General-EWS	Full Time	Dr. Neetu Rani
2	251671000107	Ashutosh Sharma	General	Full Time	Dr. Sumit Dookia
3	251671000218	Gargi Rawat	General	Full Time	Prof. Prodyut Battacharya
4	251671000308	Kumari Rinku	General	Full Time	Prof. Varun Joshi and Dr. Tuisem Shimrah
5	251671000220	Kusum Jaswal	General	Full Time	Prof. Kiranmay Sarma and Prof. Varun Joshi
6	251671000602	Semanti Deb	General	Full Time	Prof. Deeksha Katyal

The above candidates are required to report with the fee slip at USEM Office (Room No. 104, A Block, GGSIP University, Sector 16C, Dwarka, New Delhi – 110078) at the earliest, latest by 04th July 2025 during 11:00 am to 4:00 pm for document submission on working days. The Candidates shall bring the following documents:

1. Photocopy of Bank Challan of Rs. 60,500/- after submission of fee of Rs. 60,500/- in Indian Bank situated in the University Campus, Dwarka, New Delhi 110078.
2. Two sets of duly filed Registration Forms (attached), Six Passport Size Photographs.
3. Two sets of all the educational qualification documents/certificates (self attested copy of Master's/Graduate/10th & 12th Degree/Certificate/Mark Sheets/Provisional certificates etc.)
4. Self attested copy of the other relevant documents under which any exemption/relaxation has been claimed, (JRF/NET/GATE etc.)

Contd...2

5. Category Certificate (SC/ST/PWD/EWS)
6. No Objection Certificate from Employer, if employed
7. Two Sets of duly Filled identity card form (attached)
8. Bring all relevant original document also for verification.


(Prof. Varun Joshi)
Dean, USEM

Copy to:-

1. Director (Research Development Cell) for information and necessary action.
2. Head UITS, Server Room for uploading on the University Website.
3. AR to Vice Chancellor for information of Hon'ble Vice Chancellor, GGSIPU.
4. AR to Registrar for information of the Registrar, GGSIPU.
5. Guard File

GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

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

Website: www.ipu.ac.in



OFFICE OF THE DIRECTOR (RESEARCH & DEVELOPMENT CELL)

Ph: 011-25302123 & email Id: drc@ipu.ac.in

APPLICATION FORM FOR REGISTRATION IN THE Ph.D. PROGRAMME

Attach
Photograph

- 1 Academic Session: _____
- 2 Full Time: ☐ Part Time: ☐
- 3 Enrollment 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 and Co-Supervisor (if any): _____
- 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	
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Month	
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Year	
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14 Category:	Gen/OBC	EWS	SC	ST	PWD	Male/ Female/ Transgender

15 Details of the Academic Qualifications & Experience:

(a) Academic Qualifications (Attach self-verified copy of the 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) Qualified NET(JRF)/GATE/UGC-CSIR (NET/JRF)/DBT (JRF)/ICMR (JRF)/Others Yes/No Details: _____
(Attach certificate, if applicable)

- (c) Details of the Teaching/ Research Experience if any (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 / 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

FEE STRUCTURE FOR REGISTRATION

(₹) 57,000/-

- 1 Registration fees
2 Mode / Proof of submission of fee with details: _____

CHECK LIST (Admission)

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

(Signature of the Scholar with Date)

Address: _____

(Signature of the Verifying Officer with Date)



29/C

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 _____ 31st July _____ (Year)
(for regular duration of course)

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.