

## RAJASTHAN TECHNICAL UNIVERSITY, KOTA Rawatbhata Road, Akelgarh, Kota-324010 OFFICE OF THE DEAN RESEARCH Phone: 0744-2473060, Fax: 0744-2473002, Email: researchoffice@rtu

researchoffice@rtu.ac.in

## **Application for Registration of Research Supervisor**

1.	Name:								
2.	Date of Birth: .	Recent colored photograph							
3.	Designation:								
4.	Department:								
5.	Name of Institute/College with complete address:								
5.	Personal contact details:								
	Phone No:								
	Mobile No:								
	Fax No.:								
	Email:								
7.	Academic Qualifications:								
	Degree	Branch/Specialization	Name of Institute	Name of Univers	sity Year of passing	Grade/ Division			
	Ph.D.								
	PG								
	M.Tech/M.E/								
	Msc./other								
	UG								
	B.Tech./B.E./								
	Bsc./other								
	(Attach self attested photocopy of PhD degree)								
3.	Title of own Ph	nD thesis:							

10.	Number of years of teaching experience (Attach experience certificate for duration of PG and UG							
	teaching):							
	(a) PG level	(b	) UG level					
11.	Post Doctoral Research Experience (if any):							
(a) Duration:								
	(c) Designation/Post held:							
	(Attach the proof)							
12.	No. of publications: (Minimum requirement: (a) For Professor: five research papers in refereed							
journals, (b) For Associate/Assistant Professor: two research papers in refereed jour								
	International Journal	National Journal	International Conference	National Conference				
	(Attach the list of publications on separate sheet)							
	Date:			Signature				
	The application form ofworking inDepartment							
	as a permanent emplo	ded for registration as research	supervisor in Rajasthan					
	Technical University, Kota.							
	Date:		Head of the Institute (Official seal)					
				(Omeiai stai)				

9. Number of PhD students completed thesis under supervision so far (if any):