THE UNIVERSITY OF AZAD JAMMU & KASHMIR



APPLICATION FORM FOR THE ALLOTMENT OF RESEARCH SUPERVISOR

	Department/Institute:			
Name:	Subject:			
Degree:	Session:	Session: Registration No: GPA/Marks:		
Semester:	Registra			
Date of 1st enro	lment: GP			
Tentative Title	e of Research:			
Supervisor's	Preferences:			
Preference #	Name of Faculty	Signature		
b). The coupon the n while for P	umber of slots available. For M.Phil. student	andatory. e merit list of students for preferred faculty depending allotment, the merit will be their GPA of 1st semester as criteria for allotment. There should not be any preferred for allotment.		
Degree	Allotment timeline	Responsibility		
M.Phil./MS & Equivalent	After a candidate has been enrolled for his/her 2 nd semester	Departmental M.Phil. Admission Committee		
PhD	At the time of admission	Departmental PhD Admission Committee		

Signature of student

chaired by concerned Dean

For office use only	
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Merit of students applied for preferred faculty member

CGPA/*Marks	Name of Student	Rank	**Decision

^{*}for PhD admission **if not allotted on merit give justification

Signature of Admission Committee

- 1. Name, designation and signature of Member 1
- 2. Name, designation and signature of Member 2
- 3. Name, designation and signature of Member 3 (applicable for PhD Admission Committee)
- 4. Name, designation and signature of Chairman

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Signature of Chairperson/Director/Coordinator