Center of Innovative and Applied Bioprocessing (CIAB)
(Dept. of Biotechnology, Ministry of Science & Technology, Govt. of India)
Knowledge City, Sector 81, S.A.S. Nagar, Mohali 140306, Punjab, INDIA
Website: www.ciab.res.in

Application form for admission to Ph.D. (Biotechnology) Program

Paste recent passport size self-attested photograph. The signatures should be across the face of the photo so that half of them are on the application and the other half on the photo

01. Name of the candidate (CAPITAL):

02. Father/husband's name:

03. Mother's name:

04. Date of birth:

05. Age as on **20th June, 2018**:

06. Sex: 07. Married /Unmarried:

08. Address with phone and mobile numbers:
             Permanent:

             Correspondence:

09. E-mail address:

10. Nationality:

11. Category SC/ST/OBC/General:

12. Details of UGC/CSIR/ICMR/DST/DBT examination:-
Exam name:
Or any equivalent exam.
Year of passing:

13. Educational qualification:

Name of Exam	Name of the Board/University	Subjects	Marks obtained	% / Grade	Year of passing
Xth					
XIIth					
Bachelor degree					
Master degree					

14. Training (If any):

15. Title of Master degree project:-

16. Publication/Presentations (if any):-

17. Award & Fellowship, (if any):

18. Name with contact details (including email and phone no./mobile no.) of three referees:

    i.

    ii.

    iii.

19. Application fee details (Rs. 500/-): DD No.   Date: Bank:

20. Self-attested copies of mark sheets, Certificates, award/fellowship letter, should be enclosed with the application form.

I hereby declare that the above submissions are true and to the best of my knowledge and belief and nothing has been concealed therein. In case any of the above are subsequently found false/untrue my registration shall stand terminated automatically.

Signature of the candidate

Date:
Place: