



NORTH EAST CHRISTIAN UNIVERSITY

*Established Under the Nagaland Government Act 2012 (Act No.4 of 2013)
Recognized by the University Grants Commission (UGC)*

A Ministry of the Council of Baptist Churches in North East India (CBCNEI)
Anchor Complex, Burma Camp East Block, Post Box-109
Dimapur-797112, Nagaland

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measuring
3.5 x 4.5

APPLICATION FORM FOR REGISTRATION/ADMISSION TO Ph.D. PROGRAMME (Tick (✓) the relevant box wherever provided)

Ph.D. Programme to which you are applying (fill in name of only One Programme)	
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1. Name in Full (Block Letters) (as entered in the qualifying certificate) *									
Miss/Mrs/Mr									
2. Father's/ Spouse's Name									
3. Mother's/Guardian's Name									
4. Date of Birth (in Figures)	Day		Month		Years				
(in words)									
5. Sex	Male		Female		Other Gender				
6. Nationality					7. Country				
8. Marital Status	Married			Unmarried					
9. Whether Belongs to	ST	SC	OBC	General	EWS				
<i>(Please attach self-attested copy of certificate)</i>									
10. Whether Physically Challenged									
<i>(Please attach self-attested copy of certificate)</i>									
11. Address for Correspondence									
Email									
Tel. No with STD code/Mobile No.									
12. Permanent Address									
Email									
Tel. No with STD code/Mobile No.									

13. Academic Record						
Examination Passed	Name of the School/College/Institution/University	Year of Passing	Max Marks	Marks Obtained	Div./Grade	Subject(s)/Papers offered
High School						
(10+2)/Equivalent						
Bachelor's Degree						
Master's Degree						
M.Phil.						
Any other Examination						
14. Are you pursuing any other course in this or any other University/Institution						
15. Title of the Proposed Ph.D. Topic (Attach synopsis about 1000-1500 words)						
16. Current Scholarship/ Fellowship drawn (if any, details of funding agency)						
17. Research Experience (If any)						
*Experience (From Date to date)	Designation		Organization			
<i>(Attach separate sheet, if necessary)</i>						
18. Any Published articles/books, if yes, give details						
Title of Articles/Books	Journal/Publishers		Date of Publication			
<i>(Attach separate sheet, if necessary)</i>						
19. Experience in Teaching (starting with the current job)						
Teaching	Institution & Address		Position held	From	To	
Under-Graduate Classes						
Post-Graduates Classes						
Research						
Others						
<i>(Avoid overlapping of the period of experience)</i>						

20. Undertaking/Declaration:

- (a) I declare that I fulfill the minimum eligibility requirements as prescribed by the University for admission to the Programme for which I have applied.
- (b) I further declare that the documents submitted in support of the information furnished by me in the Application Form are true in all respects and in case any entry, information, or documents are found to be false, this shall entail automatic cancellation of my admission.
- (c) I note that my admission to the University is subject to the provisions of the Acts and Rules of the University.
- (d) I shall abide by the rules of discipline and proper conduct that may be framed in this regard.

Date: _____

Signature: _____

Place: _____

Name: _____

To be Filled in by the Candidates who are Employed

a) Name of the Institution/Organization & Address		
b) Position held/Designation		
c) Period of Employment (From & To)		
d) Permanent/Contractual/Ad-hoc/Project		
e) Nature of Duties/Jobs		
<i>(If necessary, a separate sheet may be used to furnish the details)</i>		

Certificate to be signed by the Head of the Institution where the candidate is employed

I certify that Mrs./Miss./Mr. _____ has been working in this Institution/University/College/Project as _____ in a temporary/ ad-hoc/contractual/permanent capacity since _____. The present term of her/his appointment is up to _____.

I further certify that Miss/Mrs/Mr. _____ will be granted leave to pursue the Ph.D. Programme as required under the present rules of the NECU Research Committee (NRC) and as may be amended from time to time.

Date: _____

Signature of the Head of the Institution
(with seal)

Place: _____

(Filled in application forms can be submitted at NECU Office OR scanned and mailed to
necuadmissions.info@gmail.com)

FOR OFFICE USE ONLY

Approved/Waitlisted/Rejected _____

Date: _____

(Admission Committee)