

APPLICATION FOR GRANT OF RESEACH DEGREE IN 8TH CONVOCATION

**APPLICABLE FOR THE STUDENTS OF DOCTOR OF PHILOSOPHY (Ph.D),
DOCTOR OF LITERATURE (D.Litt.), DOCTOR OF SCIENCE (D.Sc.) AND
DOCTOR OF LAWS (LLD)**



To,
The Vice-Chancellor,
Arunachal University of Studies,
NH-52, Knowledge City, Namsai,
Arunachal Pradesh - 792103

Hon'ble Sir,

Kindly grant me permission to attend 8th Convocation Ceremony of the University for receiving my Doctoral Degree Certificate in person:

Name of the Programme		Doctor of	RECENT PASSPORT SIZE PHOTOGRAPH FOR PRINTING ON FINAL AWARD.
Enrollment Number			
Date of Notification			
Aadhar Number			
Name of Applicant			
Father's Name			
Mother's Name			
Address	H.No./Street No.		
	Village		
	Post/ Police Station		
	Tehsil		
	District		
	State		
	Pin Code		
Mobile Number			
Email Id			

I am enclosing self-attested copies of my testimonials from class 10th onwards till latest including testimonials received from Arunachal University of Studies and all work experience certificates. I hereby declare that aforementioned information including enclosed documents are true to the best of my knowledge and belief and I am not hiding any information. I have read and understood the rules, regulations of the University. I also agree that the University is empowered to withdraw my Degree/ Diploma/Charter Certificate etc., if any information furnished by me is found to be incorrect, misleading or counterfeited.

Yours faithfully,

Enclosures:

1. DD/Online transfer in favor of Arunachal University of Studies.
2. Self-attested testimonials {See instructions for filling Application Form}

Instructions for filling the Application Form

- 1) The Degree/Diploma/Charter Certificate will be issued to the candidate in person during the 8th Convocation, scheduled to be held in February 2024.
- 2) Candidates should write their names (in BLOCK LETTERS) legibly and should conform to the university records.
- 3) The candidate is required to submit self-attested copies of the following documents:
 - a) All academic certificates from secondary (10th) level onwards including the qualification(s) pursued from the Arunachal University of Studies.
 - b) Details of Work Experience/ Internship etc., if applicable.
 - c) Identity and address Proof.
- 4) Application fee as detailed below:

Convocation Fee:

- Enclose Transaction Slip of Online Transfer of Rs 5,000/- in favor of the Arunachal University of Studies, A/c No. 33162597948, State Bank of India, Branch: Namsai, Arunachal Pradesh vide IFSC code: SBIN0013311. or
- Enclose a **Demand Draft** for Rs. 5,000/- in favor of Arunachal University of Studies payable at Namsai, Arunachal Pradesh.

Metalic Plaque of Honour Fee(Optional):

(The Candidate will be provided additional degree printed on metalic plaque alongwith paper degree certificate)

- Enclose Transaction Slip of Online Transfer of Rs 11,000/- in favor of the Arunachal University of Studies, A/c No. 33162597948, State Bank of India, Branch: Namsai, Arunachal Pradesh vide IFSC code: SBIN0013311.
- 5) The duly filled application form along-with requisite enclosures must reach to the office of
The Vice - Chancellor,
Arunachal University of Studies
NH-52, Namsai, Arunachal Pradesh - 792103. {By Registered/ Speed Post Only}
 - 6) Incomplete/incorrect/insufficient/unpaid applications will be summarily rejected without any further correspondence.
 - 7) The candidates are advised as a safeguard against non-delivery of applications, to submit the same well before the prescribed date (by Registered/ Speed post with acknowledgement due).
 - 8) In case of absence of the candidate during the convocation their award shall be treated as in absentia. However, for receiving the certificates through post, the candidate will be required to re-apply for Express Convocation in Absentia with the balance prescribed fees.

ALUMNI FEEDBACK

(Please fill in the form in Capital Letters)

ENROLLMENT NO. : _____

NAME OF ALUMNI : _____

COURSE NAME : _____

PASSING YEAR : _____

MOBILE NUMBER(1): MOBILE NUMBER(2):

EMAIL : _____

ADDRESS : _____

DISTRICT: _____ STATE: _____ PIN:

EMPLOYMENT
STATUS

: EMPLOYED ☐

NOT EMPLOYED ☐

(If employed, then fill the details)

FULL NAME OF COMPANY: _____

DESIGNATION : _____

CTC (IN LAKHS) : _____

COMPLETE ADDRESS
OF THE COMPANY : _____

DISTRICT: _____ STATE: _____ PIN:

WEBSITE OF COMPANY : WWW. _____

COMPANY CONTACT NO. : _____

PURSUING HIGHER EDUCATION: YES ☐ NO ☐

(If yes, then fill the details)

NAME OF UNIVERSITY / INSTITUTE : _____

COURSE PURSUING : _____

ADDRESS OF UNIVERSITY/ INSTITUTE : _____

FEEDBACK ABOUT AUS: _____

Date : / /

Signature of Alumni