Application for Project for Post Graduate in Central Power Research Institute

(Important: Please use only A4 size paper for application and other testimonials)

Affix recent passport size Photograph here

01	Name in full (in Block letters)	
02	Field of Interest for the Project (to be filled as per the R&D areas specified in Annexure – I of the advertisement)	a. <preference 1=""></preference>b. <preference 2=""></preference>c. <preference 3=""> and so on</preference>
03	Area of specialization	
04	Age and Date of Birth (Enclose a copy of certificate in support of age)	
05	Nationality	
06	Father's/Husband's name	
07	Address for correspondence (in Block letters)	
08	Permanent Address	
9(a)	Telephone No. (Landline/Cell)	Landline:
		Mobile :
		E-mail id :
(b)	Alternate number if any	

10		and semester	r (at the time of						
11									
		_	rofessional	_		•	_		•
	examinations passed, University/Board, Year and Month of passing, class and percentage of marks & subjects taken starting from								
			lification pr						
			marks shou						
		•							-
	marks sheets of all semesters should be enclosed. If the examination is year-wise marks should be indicated year wise and copies of marks sheets								
			ould be encl	osed, a	along	with cer	tificates,	failing v	which the
			be rejected:	0.4	C	36 1	O1	0.1:	7771 (1
Exam ion	ınat	Year and month of	Board/ University/		_	Marks	Class obtain	Subjec ts	Whether marks
passe	d	passing	Institution	semester wise /year wise			ed	taken	sheets
passe	u	passing	montation	, ,		•	cu	taken	enclosed
					ester	% of marks			
					ear				
			(ATTACH SE	<i>PARA</i> 1	ELY	as Annex	cure – I)		
12	Deta	ils of Res	earch Project	work					
	unde	ertaken - Atta	ach separate she	et					
13	Deta	ils of Resear	ch papers publis	hed					
13		ch separate sl		iicu					
	11000	on separate si	1000						
14	Details of Professional membership								
15	Details of special work servind out if								
13	Details of special work carried out if any - Attach separate sheet								
		- man sept							
16	Deta	ils of Train	ning/Course at	tended					
	Atta	ch separate sl	neet						
17	Data	ile of Comin	or/Troining/sha	ot town					
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18	Details of awards/honours received	
	Attach separate sheet	
19	Please attach a brief note on proposed	
	R&D area in which you are interested	
	to work at CPRI (should not exceed 2	
	pages) - Attach separate sheet	
20	GATE SCORE (Attach copy of the	
	Gate Score card), if any	
i)	GATE All India Rank	
ii)	No. of candidates appeared during the	
	year	
iii)	Marks obtained (out of 100)	
iv)	GATE Score	
v)	All India Rank	
vi)	Qualifying marks	
vii)	Percentile = All India Rank x 100	
	No. of candidates appeared	

Check list:

- 1) Certificate of bonafide student in the prescribed format with photograph attested by Principal / Head of the Institution
- 2) Details of percentage of marks obtained and GATE Score if any.
- 3) Self-attested copy of all the mark sheets of all semesters of undergraduate course.
- 4) Self-attested copy of the mark sheets of the latest completed semesters in Post graduate course.

Signature of the Student

Name and Signature of Research Supervisor / guide from Institute

Recommended by:

Head of the Department With Address, Phone, Fax and Mobile No

Acceptance of risk factors

I,	_ student	from
(name	e of the Institute) working	for my project
work in CPRI, leading to M.E / M.Tech of		_ (Name of the
Institute / University), hereby state that I underst	and the possible accidental	physical risks
which I may encounter while carrying out my pr	roject work at CPRI. I	hereby declare
that I will carry out my project work in CPR	tI at my own risk and I wil	l not hold CPRI
responsible for any type of physical injury caused	l to me during my project w	ork at CPRI due
to accident or due to any other natural calamities	or indispodition.	
	Signatu	re of the Student
Date:		
Place:		
Name and Signature of Research Supervisor / guide from Institute (Affix Official S	Stamp)	

Name and Signature of Head of the Division from CPRI Where student is carrying out ptoject work (Affix Official Stamp)

Declaration of Non Disclosure

I,	student from
(name of the Institute),	working for my project work leading to M.E / M.Tech of
(na	me of the Institute / University) hereby undertake that I will not
divulge any technical info	rmation which I may directly or indirectly come across while
carrying out my project wor	rk at CPRI without the written permission of the Director General,
CPRI. If found otherwise,	CPRI is free to take appropriate action which it finds fit against
me.	
	Signature of the Student
	Signature of the Student
Date:	
Place:	
Name and Signature of Reso Supervisor / guide from Ins	earch stitute (Affix Official Stamp)
	ad of the Division of the Institute
(Affix Official Stamp)	
Director / Principal of the Ir	nstitute(Affix Official Stamp)
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GENERAL DECLARATION

I undertake to abide by the rules and regulations of the Institute. I affirm that the information given in this application is true and correct. I also fully understand that if at any stage it is discovered that any attempt has been made by me to willfully conceal or misrepresent the facts, my candidature will be summarily rejected.

I am willing to work on the research theme proposed by the Institute, and complete the work within stipulated period.

Place:	Signature of the student
Date:	

LATEST
PASSPORT SIZE
PHOTOGRAPH
OF THE
STUDENT – to be
attested by HOD

BONAFIDE CERTIFICATE

This is to certify that	(Name of the candidate), whose
photograph is affixed, is a bonafide student of this Institute	
(College/Institute), enrolled for <i><name course="" of=""></name></i> .	
(Name, Signature, email ID of t	he -Principal/ Director / HOD)
	(Affix Official Stamn)