

Indian Institute of Information Technology Allahabad

(An Institute of National Importance)

Advertisement for Admission in Ph.D. (With Institute/ External Fellowship)/ Non full-time PhD Program for Working Professionals

Interested & eligible applicants from all over the country are invited to apply for admission in the following programs running at IITA, Prayagraj -

1. [PhD \(in regular mode with Institute Fellowship\)](#) - [APPLY](#)
 2. [PhD \(in regular mode with External Fellowship\)](#) - [APPLY](#)
 3. [PhD \(in Working Professional Mode\)](#) - [APPLY](#)
- Click on the “APPLY” link, mentioned next to the program name, to apply for admission in the respective program.
- Applicants are advised to completely fill all your details in the online application portal along with paying the requisite fee by the due date & time. Without both the things being completed, application submission will be summarily rejected.
- Click on above programs to know more information & eligibility criteria.
- [CLICK HERE](#) to get the information about the fee structure of the above programs (In case of any revision in fee the difference amount will have to be paid by the selected candidates for 1st Semester.)
- [Last date to apply for admission in all the programs is 24th November, 2022](#) (for JAN -JUN 2023 Session)

Tentative Schedule of Admission: For Session January-June, 2023			
Particulars	PhD (with Institute Fellowship)	PhD (with External Fellowship)	PhD (WP)
Last Date to Apply*	24th November, 2022	24th November, 2022	24th November, 2022
Announcement of Shortlisted Candidates for Written Examination	5th December 2022	-	-
Date of Written Examination	13th December 2022	-	-
Date of Interview	13th to 15th December 2022	13th to 15th December 2022	13th to 15th December 2022

Application Fee:

Application Fee (non-refundable):

- Rs.1000/- for General/ EWS/ OBC category
- Rs.500/- for SC/ ST/ PWD category

The candidates can deposit the requisite application fee by using net banking or debit/credit card facilities. Additional charges will be applicable as per the rule of the concerned bank. The Fee will not be accepted through any other mode

Reservation:

- The reservation of seats in admissions for SC, ST, OBC, EWS categories and for Persons with Disability (PwD) will be as per Government of India rules.

List of documents to be uploaded by the applicants at the time of filling application form:

- Please see Annexure - 4

Queries:

Please contact

- for queries related to technical issued - abhinaba@iita.ac.in / 0532-292-2042
- For Academic queries related to Department of Applied Sciences - 0532-292-2197
- For Academic queries related to Department of Electronics & Communications Engineering- 0532-292-2101
- For Academic queries related to Department of Information Technology - 0532-292-2197
- For Academic queries related to Department of Management Studies - 0532-292-2197
- For other queries - rds@iita.ac.in / 0532-292-2087/2239

General Guidelines -

1. Applicants applying for Admission in **PhD (in regular mode with Institute Fellowship)** may be considered under category **PhD (in regular mode with External Fellowship)** at the recommendation of the Selection Committee if they have an external fellowship.
2. Applicants selected for Admission in PhD under **regular mode with External Fellowship or Working Professional Mode** may not be transferred under the **Institute Fellowship** category as per Institute Guideline.
3. The eligibility criteria along with all other details of any particular program is given on respective pages linked with Program Names.
4. The candidates are advised to read every instruction given in this Information Brochure very carefully before applying Online.
5. Candidates are requested to apply online only. The hard copy of the application need not be submitted. The application in any other mode/form will not be considered.
6. The prescribed qualifications and experience are the minimum required and the mere fact that a candidate possesses the same will not entitle him/her for being called for an interview.
7. Departments of the Institute reserve the right to restrict the number of candidates to be called for interview to a reasonable number, based on marks of written examination, qualifications and/or experience.
8. Departments may add other conditions for shortlisting the applications other than the minimum condition as laid down in PhD Ordinance.
9. All entries should be carefully made while applying online. IITA will not be responsible for the wrong entries. Candidates shall be solely responsible for the correctness and authenticity of the information/documents provided in the online application.
10. Online applications submitted by the candidates shall be considered final and binding & requests for making corrections in the online application shall not be entertained.
11. Online applications, found incomplete in any form, will be summarily rejected. No correspondence/communication will be entertained in this regard.
12. Online applications will be scrutinized, relevant documents checked/verified for their authenticity.
13. Students shall be governed by ordinance/ regulations of IITA.
14. The Institute has the right to cancel, at any stage, the admission for the candidate who is found admitted to a course to which he/she is not entitled, being unqualified or ineligible in accordance with the statutes and regulations in force.
15. The Institute reserves the right to verify the antecedents or documents submitted by the candidate at any time during their period of study. In case it is found that the documents submitted by the candidate are not genuine, then his/her admission shall be terminated.
16. Merely applying for / being shortlisted/appearing for the interview / written test / or subsequent processes does not imply that a candidate will necessarily be offered admission in IIT Allahabad. No request for considering the candidature in the department, other than in which applied through online mode, will be entertained.
17. Candidates are advised to fill their correct and active mobile number & email addresses in the online application as all correspondence will be made by the Institute through email. Test/Interview schedule will be emailed in due course to the candidates in their registered e-mail. Further, for any updates, please visit the Institute website regularly, for subsequent amendments in the advertisement and results.
18. The candidates should ensure that they fulfill all the eligibility conditions as specified. Their Admission will be purely provisional subject to confirmation that they satisfy the prescribed eligibility conditions. Mere issue of call letters to the candidates will not imply that his/her candidature has been found eligible.
19. After joining, Hostel and Mess facilities will be provided as per the availability.

Information Regarding Admission in PhD (in regular mode with Institute Fellowship)

A. Eligibility -

- i) Candidates who have passed or are in the Final Year/ Semester of their respective Professional Degree Programs as per (iv) are eligible to apply.
- ii) The candidate MUST have secured at least 65% cumulatively or equivalent CGPI at the time of application submission itself. Candidates in all cases shall however be required to be clear PASS with 65% Marks or Equivalent Cumulative Grade Point Index before being finally joining into the Program. 5% relaxation shall be applicable for SC/ST/PH Candidates.
- iii) A B.Tech candidate with minimum CGPI of 8.5 and who clears the requirements of the entrance process will be considered for admission to Ph.D.
- iv) Qualification -
 - (a) For Candidates with B.Tech./ M.Tech./ B.Pharm./ M.Pharm. Degree Backgrounds -
 - GATE Score (Not more than Four Years old, on the cutoff date for applications for Ph.D. Degree) OR
 - GRE Score (Not more than Four Year Old, on the cutoff date for applications for Ph.D. Degree) OR
 - UGC/CSIR NET or JRF (Period of eligibility as per the respective Funding Agency norms; For NET not more than two years old)
 - (b) For Candidates with M.Sc./ MCA Backgrounds -
 - GATE (Not more than Four Year Old, on the cut off date for applications for Ph.D. Degree) OR
 - UGC/ CSIR NET or JRF/ INSPIRE Qualified Candidates for JRF purposes (Period of eligibility as per the respective Funding Agency norms; For NET not more than two years old)
 - (c) For Candidates with MBA / M.Com. Background -
 - CAT Qualified (Not more than Four Year Old, on the cutoff date for applications for Ph.D. Degree) OR
 - GMAT Score (Not more than Four Year Old, on the cutoff date for applications for Ph.D. Degree) OR
 - UGC /CSIR NET or JRF Qualified Candidates (Period of eligibility as per the respective Funding Agency norms; For NET not more than two years old)
- v) The candidates with CGPI of more than 8.0 from IITs/ IIITs/ IISERs/ and such institutions of National importance could be called for interaction/interview sessions directly.

B. Candidate Evaluation Process -

- System generated list (automatically through the portal) of received applications will be downloaded by the respective departments.
- Each department will conduct the written test & Interview in OFFLINE mode for all the screened in applicants.
- The selection of the candidate will be subject to the recommendation of Evaluation Committee & approval of Competent Authority through proper channels.

Information Regarding Admission in PhD (in regular mode with External Fellowship)

A. Eligibility:-

- i) Candidates who have passed or are in the Final Year/ Semester of their respective Professional Degree Programs as per (iii) are eligible to apply.
- ii) The candidate MUST have secured at least 65% cumulatively or equivalent CGPI at the time of application submission itself. Candidates in all cases shall however be required to be clear PASS with 65% Marks or Equivalent Cumulative Grade Point Index before being finally joining into the Program. 5% relaxation shall be applicable for SC/ ST/ PH Candidates.
- iii) Qualification - B.Tech./ M.Tech./ B.Pharm./ M.Pharm. Degree/ M.Sc./ MCA/ MBA/ M.Com.
- iv) A B.Tech candidate with minimum CGPI of 8.5 and who clears the requirements of the entrance process will be considered for admission to Ph.D.
- v) The candidates with CGPI of more than 8.0 from IITs/ IIITs/ IISERs/ and such institutions of National importance could be called for interaction/ interview sessions directly.

B. Candidate Evaluation Process -

- System generated list of received applications will be downloaded by the respective departments.
- Department will schedule & inform the date of the Interview to the candidate.
- The selection of the candidate will be subject to the recommendation of Evaluation Committee & approval of Competent Authority through proper channels.

Information Regarding Admission in Non Full-time PhD Program for Working Professionals

A. Eligibility:-

- i) Candidates who have passed or are in the Final Year/ Semester of their respective Professional Degree Programs as per (iii) are eligible to apply.
- ii) The candidate MUST have secured at least 65% cumulatively or equivalent CGPI at the time of application submission itself. Candidates in all cases shall however be required to be clear PASS with 65% Marks or Equivalent Cumulative Grade Point Index before being finally joining into the Program. 5% relaxation shall be applicable for SC/ST/PH Candidates.
- iii) Qualification - B.Tech./ M.Tech./ B.Pharm./ M.Pharm. Degree/ M.Sc./ MCA/ MBA/ M.Com.
- iv) A B.Tech candidate with minimum CGPI of 8.5 and who clears the requirements of the entrance process will be considered for admission to Ph.D.
- v) The candidates with CGPI of more than 8.0 from IITs/ IIITs/ IISERs/ and such institutions of National importance could be called for interaction/interview sessions directly.
- vi) 2 years of work experience in the applicant's current organization

B. Candidate Evaluation Process -

- Sponsored working professionals would be called for interaction/ interviews directly.
- System generated list of received applications will be forwarded to the Proposed Supervisor.
- Proposed Supervisor will "ACCEPT (for further processing) / REJECT" the application.
- If the application of Applicant is ACCEPTED by the proposed supervisor, it will be sent to the Department Post Graduate Committee (DPGC) for further processing.
- DPGC will schedule & inform the date of Interview/ Evaluation to the candidate.
- The selection of the candidate will be subject to the recommendation of Evaluation Committee & approval of Competent Authority through proper channels.

LIST OF DOCUMENTS TO BE UPLOADED BY THE APPLICANTS

Note: Candidates are required to upload the colored scanned copy of the following original Documents:

1. Transcript/ Mark sheet of U.G for Final Semester.
2. Transcript/ Mark sheet of P.G for Final Semester.

3. [Additional Documents Required if applying With Institute/ External Fellowship](#)

For Candidates with B.Tech. / M.Tech. / B.Pharm. / M.Pharm. Degree Backgrounds

- a) GATE Score (Not more than Four Years old, on the cutoff date for applications for Ph.D. Degree) OR
- b) GRE Score (Not more than Four Year Old, on the cutoff date for applications for Ph.D. Degree) OR
- c) UGC/ CSIR NET or JRF (Period of eligibility as per the respective Funding Agency norms; For NET not more than two years old)

For Candidates with M.Sc. / MCA Backgrounds

- a) GATE (Not more than Four Year Old, on the cutoff date for applications for Ph.D. Degree)OR
- b) UGC/ CSIR NET or JRF/ INSPIRE Qualified Candidates for JRF purposes (Period of eligibility as per the respective Funding Agency norms; For NET not more than two years old)

For Candidates with MBA / M.Com. Background

- a) CAT Qualified (Not more than Four Year Old, on the cutoff date for applications for Ph.D. Degree) OR
- b) GMAT Score (Not more than Four Year Old, on the cutoff date for applications for Ph.D. Degree) OR
- c) UGC/ CSIR NET or JRF Qualified Candidates (Period of eligibility as per the respective Funding Agency norms; For NET not more than two years old)

[Additional Documents Required if applying With External Fellowship](#)

4. Valid Fellowship / NET-JRF AWARD LETTER

[Additional Documents Required for SC/ST/ -](#)

5. Certificate of category / Caste Certificate as per Government of India format, issued by the competent authority.

[Additional Documents Required for OBC-NCL -](#)

6. *Undertaking by the candidate on OBC-NCL status in the prescribed format. (*Annexure-5)
7. OBC-NCL Certificate as per “*Annexure - 6” must be issued on or after April 01, 2022.

[Additional Documents Required for EWS -](#)

8. EWS Category Certificate as per “*Annexure - 7” must be issued on or after April 01, 2022.

[Additional Documents Required for PwD -](#)

9. *Original Certificate for Persons with Disabilities (PwD), if applicable, issued by the competent authority. (*Annexure-8)

[Additional Documents Required for Students selected for admission under External Project Fund -](#)

10. Appointment Letter Along with Project Sanction Letter

[Additional Documents Required if applying as PhD Working Professionals -](#)

11. *NOC/ Support letter issued to candidate by his/ her current organization for Joining this Program at IIIT-A.
12. Work Experience Certificate issued from current organization stating that the candidate has worked for +2 years.
13. *Declaration Form/ NoC (*Annexure-9/ 10) as applicable to be filled and signed by Candidate and Candidate’s organization.
14. Supervisor Acceptance Letter (Annexure - 11)

[Please note that -](#)

15. In the attached Annexure(s) please leave the portion blank where you are supposed to mention your enrollment number.
16. ST certificates from Tamil Nadu state must be issued by the concerned Revenue Divisional Officer.
17. Caste certificate (SC/ST/OBC-NCL) issued by Maharashtra State must be validated by the Social Welfare department (in case of SC and OBC-NCL category) and Tribal Welfare department (in case of ST category) of Maharashtra Government.

[OBC UNDERTAKING]

(Declaration / undertaking - for OBC Candidates only)

I, _____ son/daughter of Shri _____
_____ resident of village/town/city _____ district
_____ State hereby declare that I belong to the _____
community which is recognized as a backward class by the Government of India for the
purpose of reservation in services as per orders contained in Department of Personnel and
Training Office Memorandum No.36012/22/93- Estt. (SCT), dated 8/9/1993. It is also
declared that I do not belong to persons/sections(Creamy Layer) mentioned in Column 3 of
the Schedule to the above referred Office Memorandum, dated 8/9/1993, which is modified
vide Department of Personnel and Training Office Memorandum No.36033/3/2004 Estt.(Res.)
dated 9/3/2004. I also declare that the condition of status/annual income for creamy layer of
my parents/guardian is within prescribed limits as of the financial year ending on March
31,2022.

Place:

Signature of the Candidate*

Date:

****Declaration/undertaking not signed by Candidate will be rejected***

**FORMAT FOR OBC [NCL] CERTIFICATE
(TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR ADMISSION IN IIITA)**

[This certificate MUST have been issued on or after 1st April 2022]

This is to certify that Shri/Smt./Kum. _____ Son/Daughter of
Shri/Smt. _____ of Village/Town _____
District/Division _____ in the _____ (State/UT) belongs to the
_____ Community which is recognized as a backward class under:

1. Resolution No. 12011/68/93-BCC(C), dated 10/09/93 published in the Gazette of India Extraordinary Part I Section I No. 186, dated 13/09/93.
2. Resolution No. 12011/9/94-BCC, dated 19/10/94 published in the Gazette of India Extraordinary Part I Section I No. 163, dated 20/10/94.
3. Resolution No. 12011/7/95-BCC, dated 24/05/95 published in the Gazette of India Extraordinary Part I Section I No. 88, dated 25/05/95.
4. Resolution No. 12011/96/94-BCC, dated 9/03/96.
5. Resolution No. 12011/44/96-BCC, dated 6/12/96 published in the Gazette of India Extraordinary Part I Section I No. 210, dated 11/12/96.
6. Resolution No. 12011/13/97-BCC, dated 03/12/97.
7. Resolution No. 12011/99/94-BCC, dated 11/12/97.
8. Resolution No. 12011/68/98-BCC, dated 27/10/99.
9. Resolution No. 12011/88/98-BCC, dated 6/12/99 published in the Gazette of India Extraordinary Part I Section I No. 270, dated 06/12/99.
10. Resolution No. 12011/36/99-BCC, dated 04/04/2000 published in the Gazette of India Extraordinary Part I Section I No. 71, dated 04/04/2000.
11. Resolution No. 12011/44/99-BCC, dated 21/09/2000 published in the Gazette of India Extraordinary Part I Section I No. 210, dated 21/09/2000.
12. Resolution No. 12016/9/2000-BCC, dated 06/09/2001.
13. Resolution No. 12011/1/2001-BCC, dated 19/06/2003.
14. Resolution No. 12011/4/2002-BCC, dated 13/01/2004.
15. Resolution No. 12011/9/2004-BCC, dated 16/01/2006 published in the Gazette of India Extraordinary Part I Section I No. 210, dated 16/01/2006.
16. Resolution No. 12015/2/2007-BCC, dated 18/08/2010.
17. Resolution No. 12015/2/2007-BCC, dated 11/10/2010.
18. Resolution No. 12015/13/2010-BC-II, dated 08/12/2011.
19. Resolution No. 12015/05/2011-BC-II, dated 17/02/2014.
20. Resolution No. 12011/6/2014-BC-II, dated 07/12/2016.
21. Resolution No. 12011/13/2016-BC-II, dated 22/12/2016
22. Resolution No. 20012/1/2017-BC-II, dated 19/01/2017
23. Resolution No. 12011/7/2017-BC-II, dated 31/07/2017

Shri/Smt./Kum. _____ and/or his/HER family ordinarily reside(s) in the
_____ District/Division of _____ State/UT. This is also to certify that
he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule
to the Government of India, Department of Personnel & Training O.M. No. 36 012/22/93-Estt.(SCT),
dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt.(Res.), dated 09/03/2004, further
modified vide OM No. 36033/3/2004-Estt. (Res) dated 14/10/2008, again further modified vide OM No.
36036/2/2013-Estt (Res) dated 30/05/2014.

Date: _____

Place: _____

Signature _____
(with seal of office)

Designation _____

NOTE:

- A. The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- B. The authorities competent to issue Caste Certificates are indicated below:
 - I. District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / First Class Stipendiary Magistrate / Sub-Divisional magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1ST Class Stipendiary Magistrate) .
 - II. Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
 - III. Revenue Officer not below the rank of Tehsildar.
 - IV. Sub-Divisional Officer of the area where the candidate and / or his family resides.
- C. OBC Certificate issued from Maharashtra State must be validated by the Social Welfare Department of Maharashtra Government.

INCOME & ASSETS CERTIFICATE
TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Government of _____

(Name & Address of the authority issuing the certificate)

[This certificate MUST have been issued on or after 1st April 2022]

Certificate No. _____

Date _____

VALID FOR THE YEAR _____

1. This is to certify that Shri/Smt./Kumari _____, son/daughter/wife of _____ permanent resident of _____ (Village/Street) _____ (Post Office) _____ District in the _____ (State/Union Territory) _____ (Pin Code) whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income* of his/her family** is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year _____. His/her family does not own or possess any of the following assets***
- I. 5 acres of agricultural land and above;
 - II. Residential flat of 1000 sq. ft. and above;
 - III. Residential plot of 100 sq. yards and above in notified municipalities;
 - IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.
2. Shri/Smt./Kumari _____ belongs to the caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List).

Signature _____
(With Seal of the Office)

Name _____

Designation _____

**Latest
Passport Size
Photograph**

The income and assets of the families as mentioned would be required to be certified by an officer not below the rank of Tehsildar in the States/UTs.

Note:

*Income covered all sources i.e. salary, agriculture, business, profession, etc.

**The term "Family" for this purpose includes the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.

***The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

**FORMAT FOR DYSLEXIA CERTIFICATE - I
MEDICAL CERTIFICATE TO BE PRODUCED BY DYSLEXIC CANDIDATES**

{Psycho-Education Evaluation Report - To be obtained from any Dyslexia Association*}

No. _____

Date: _____

Name of the candidate: _____

Date of Birth: ____/____/____

Name of the father/mother/Guardian _____

Registration in the Dyslexia Assn. (date / number): No. _____

Date: ____/____/____

Name/ Address and Regn. No. of the Dyslexia Association: _____

Passport
Size
Photo of
Candidate

Physical & Neurologic Assessment: []
 Psychological Assessment: []WISC
 Verbal IQ:
 Performance IQ:
 Full Scale IQ:
 Interpretation: []
 Educational Assessment: []

Certified that:

The condition of handicap is: MILD / MODERATE / SEVERE (tick whichever is applicable)**
 The disability is PERMANENT in nature.

***Some Dyslexia Associations:**

1. Dyslexia Trust of Kolkata, Divya Jalan, Aruna Bhaskar 3, Dover Park, Kolkata – 700019
2. Dyslexia Association Of Andhra Pradesh (DAAP), 3-4-494/1,1st Floor, Macherla Gastrology Hospital, Reddy College Road, Barkatpura, Hyderabad, Telangana,500027
3. Madras Dyslexia Association, 94 Park View, 1st Floor, G.N. Chetty Road, T. Nagar, Chennai – 600017
4. Maharashtra Dyslexia Association, 003, Amit Park Bldg, L J Road, Deonar, Mumbai 400088
5. The Dyslexia Association of India, MZ-47, The Centre Stage Mall, Plot No 01, Block L, Sector 18, NOIDA 201303

**Learning Disability is a permanent developmental disorder. Currently there are no standard approved methods to quantify the disorder. However, the method of diagnosis is based on significant impairment in academic achievement. To avail the benefit of relaxed norm under PwD category, the candidate must come under SEVERE category.

**Official Seal:
[Signature]**

Name of the certifying Official: _____

**FORMAT FOR DYSLEXIA CERTIFICATE - II
TESTIMONIAL TO BE PRODUCED BY DYSLEXIC CANDIDATES**

{Testimonial - To be obtained from the Principal of the school/college last attended*}

No. _____

Date: _____

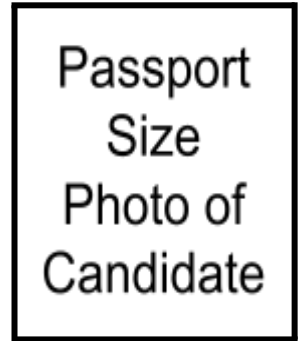
Name of the candidate: _____

Date of Birth: ____ / ____ / ____

Name of the father/mother/Guardian _____

Registration in the Dyslexia Assn. (date / number): _____

Name & Address of School/ College: _____



Certified that:

Shri/Shrimati/Kumari _____ son/daughter of _____

_____ of _____ Village / Town passed his/her Class X from

this school and as per records, he/she has availed concession under dyslexic category.

**Official Seal:
[Signature]**

Name of the certifying Official: _____

***A candidate passing Class X or equivalent through open school system or in private mode may submit the certificate to this effect from the competent authority in the board certifying the concessions availed under dyslexia.**

DISABILITY CERTIFICATE FORMAT - II

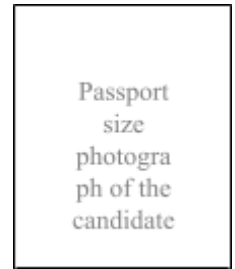
{In cases of amputation or complete permanent paralysis of limbs and in cases of blindness}

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

No. - _____

Date - ____/____/____

Signature/LTI/RTI of the Candidate



This is to certify that I have carefully examined Shri/Smt./Kum. _____

son/wife/daughter of Shri _____ Date of Birth ____/____/____

[Age - ____ years], male/female, Registration No. _____ permanent resident of

House No. - _____, Ward/Village/Street _____, Post Office _____

_____ District- _____ State _____ whose

photograph is affixed above, and am satisfied that

1. he/she is a case of (Please tick as applicable):

- a. locomotor disability
- b. blindness

2. The diagnosis in his/hercase is _____

3. He / She has _____ % (in figure) _____ percent (in words) permanent physical impairment/blindness in relation to his/her _____ (part of body) as per guidelines (to be specified).

4. The applicant has submitted the following document as proof of residence:-

Nature of Document	Date of Issue	Details of authority issuing the certificate

Official Seal:

**[Authorized Signatory of notified Medical Authority]
Name:**

DISABILITY CERTIFICATE FORMAT - III

{In cases of multiple disabilities}

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

No. - _____

Date - ____/____/____

Signature/LTI/RTI of the Candidate

Passport
size
photogra
ph of the
candidate

This is to certify that I have carefully examined Shri/Smt./Kum. _____
 son/wife/daughter of Shri _____ Date of Birth ____/____/____
 [Age - ____ years], male/female, Registration No. _____ permanent resident of
 House No. - _____, Ward/Village/Street _____, Post Office _____
 _____ District- _____ State _____ whose
 photograph is affixed above, and am satisfied that

1. He/she is a Case of **Multiple Disability**. His/her extent of permanent physical impairment/ disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below, and shown against the relevant disability in the table below:

S. No.	Disability	Affected Part of Body	Diagnosis	Permanent physical impairment/mental disability (in %)
1	Locomotor disability	@		
2	Low vision	#		
3	Blindness	Both Eyes		
4	Hearing impairment	£		
5	Mental retardation	X		

6	Mental-illness	X		
---	----------------	---	--	--

Cntd.

2. In the light of the above, his/her overall permanent physical impairment as per guidelines (to be specified), is as follows:

In figures: _____%

In words: _____percent

3. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.

4. Reassessment of disability is:

I. Not Necessary **[or]**

II. Is recommended/after _____years _____months, and therefore this certificate shall be valid till (DD/MM/YY)_____.

@ - e.g. Left/Right/both

arms/legs # - e.g. single

eye/both eyes

£- e.g. Left/Right/both ears

5. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of Issue	Details of authority issuing the certificate

6. Signature and seal of the Medical Authority:

Name and Seal of Member	Name of Seal of Member	Name and Seal of the Chairperson

DISABILITY CERTIFICATE FORMAT - IV

{In cases of any other case not covered in Format – II & III}

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

No. - _____

Date - ____/____/____

Signature/LTI/RTI of the Candidate

Passport
size
photogra
ph of the
candidate

This is to certify that I have carefully examined Shri/Smt./Kum. _____
 _____ son/wife/daughter of Shri _____ Date of
 Birth ____/____/____ [Age - ____ years], male/female, Registration No. _____
 permanent resident of House No. - _____, Ward/Village/Street _____ Post
 Office _____ District- _____ State _____
 whose photograph is affixed above, and am satisfied that

1. He/she is a Case of **Multiple Disability**. His/her extent of permanent physical impairment/ disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below, and shown against the relevant disability in the table below:

S. No.	Disability	Affected Part of Body	Diagnosis	Permanent physical impairment/mental disability (in %)
1	Locomotor disability	@		
2	Low vision	#		
3	Blindness	Both Eyes		
4	Hearing impairment	£		
5	Mental retardation	X		
6	Mental-illness	X		

Cntd.

2. In the light of the above, his/her overall permanent physical impairment as per guidelines (to be specified), is as follows:

In figures: _____ %

In words: _____ percent

3. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.

4. Reassessment of disability is:

I. Not Necessary **[or]**

II. Is recommended/after _____ years _____ months, and therefore this certificate shall be valid till (DD/MM/YY) _____.

@ - e.g. Left/Right/both arms/legs

- e.g. single eye/both eyes

£- e.g. Left/Right/both ears

5. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of Issue	Details of authority issuing the certificate

Official Seal:

[Authorized Signatory of notified Medical Authority*]

Name: _____

* In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District. Note: The principal rules were published in the Gazette of India vide notification number S.O. 908(E), dated the 31st December, 1996.

Countersigned

Official Seal:

[CMO/Medical Superintendent/Head of Govt. Hospital]

Name: _____

^ Countersignature and seal of the CMO/Medical Superintendent/Head of Government Hospital is essential in case the certificate is issued by a medical authority who is not a government servant

**DECLARATION FORM TO APPLY FOR ADMISSION IN PHD-WP PROGRAM AT IIITA
(Applicable for Candidates from Private Sectors/ Organizations)**

I, _____, S/o / D/o / W/o _____,
residing at _____, is presently working for _____
_____ (Organization Name) as _____ for _____ years. I have applied
for admission in Ph. D. program (Working Professional Mode) at Indian Institute of Information Technology,
Allahabad and my application number is _____. I hereby declare that –

A. My admission in Ph.D. program as a working professional is sponsored by _____
_____.

B. I have chosen my research studies in _____ (subject).

C. I will be a -

- i) Full time residential scholar at IIITA
- ii) Part time scholar at my Workplace
- iii) Full time scholar at my Workplace

D. I agree to complete the course requirement in remote mode, remaining in contact with the research supervisor(s) online / offline. I will carry out the studies as stipulated, submit the assignments, participate in discussion-sessions, present seminars, appear for quizzes, review tests etc. offline or online or in person.

E. I am ready to be on campus of IIITA with the research supervisor(s) for at least 15 days in every 6 months.

Date - _____

Signature- _____

Declaration by Organization/ Institute in which Applicant/ Candidate is working

As declared above by Mr. _____ we are **AGREED/ NOT AGREED** (Strike out whichever is not applicable) with the above statement. For Point No C ii) & iii) we also agreed that –

- a) Our professional Centre is recognized as a Research Centre by IIIT Allahabad
- b) The work place / professional centre of our organization is formally sponsoring the aspirant candidate for research studies on a full / part time basis.
- c) The Management / Administration agrees to extend the research facilities, infrastructural support, library / computing resources and sufficient quality time for the researcher.
- d) The Management / Administration is willing to extend the logistics of providing local hospitality and travel expenses to the research supervisor(s) / Doctoral committee whenever the visit is warranted for monitoring and reviewing the research progress and also grant permission to the candidate to travel to IIITA to meet research supervisor(s) / Doctoral committee for discussion and assessment process.
- e) The Management / Administration is ready to identify a suitably qualified resource person, if available, to act as a local mentor / local supervisor for the research candidate, who will be identified as the joint supervisor for the candidate by IIITA along with the main supervisor from IIITA.
- f) The Management / Administration is agreed to accept the research papers / patents resulting from such joint work as joint properties of both the institute/ organizations and the advantage will be proportionately shared.

Name of the Signing Authority _____

Position in Organization _____

(Not Less than Partner/ Proprietor/ Director/ MD)

Contact Number _____

E-mail _____

Signature of the Signing Authority

(With Organization Seal/ Stamp)

**NO OBJECTION CERTIFICATE TO APPLY FOR ADMISSION IN PHD-WP PROGRAM AT IITA
(ONLY for Candidates from Government Organizations/ Autonomous Bodies)**

(Following format is to be printed on the **letter head of the Organization** where the candidate is currently working)

This is to certify that Mr./Ms/Mrs. _____ is employed with our organization as _____ since _____ till date _____. He / She has an experience of _____ years and _____ months in our organization. We Sponsor him/her to join PhD under Working Professional Scheme in the department of _____ at Indian Institute of Information Technology Allahabad, in session _____ on Full-time / Part-time basis. It is certified that he/she will be allowed to use facilities for research work at our Organization. It is further certified that he/she will be allowed to spare quality time for his/her research work in the area _____, and we believe that this research work would be useful for our organization.

Date:

Signature of Head of Organization _____

Name of Head of Organization: _____

(Official Seal)

INDIAN INSTITUTE OF INFORMATION TECHNOLOGY ALLAHABAD
RESEARCH & DEVELOPMENT SECTION

SUPERVISOR'S ACCEPTANCE LETTER

(For Working Professionals only)

I, the undersigned _____ (Name and Surname), _____
(Designation) in the Department of _____ hereby declare
that I support the application of Mr./Ms./Mrs.
_____ (Name of Applicant) working as
_____ (Working Position) at _____
_____ (Current Employer's Name) to the Ph.D. for Working
Professionals program vide application no. _____, and agree to act as a
supervisor for her/his research work.

Date _____

Signature of Supervisor _____

Name of Supervisor _____