

To



Government of Maharashtra Higher and Technical Education Department

Government College of Engineering, Chandrapur

Ballarpur Bypass Road, Babupeth, Chandrapur-442 403

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 $\label{lem:condition} \begin{tabular}{ll} E-mail (Principal): $\underline{principal.gcoechandrapur@dtemaharashtra.gov.in} \\ (Office) : office.gcoechandrapur@dtemaharashtra.gov.in \\ \end{tabular}$

Application fee: Rs. 500/- (attach proof of payment)

ANNEXURE-I

APPLICATION FOR CENTRE OF HIGHER LEARNING AND RESEARCH

Head	1			Passport-
Centre of Higher Learning and Re Govt. College of Engineering Char		size photo		
Sir,			(
I wish to get registration a the faculty En Engineering Laboratory as working	gineering, and wish to	get registratio		
1. Name of Candidate:				
2. Permanent Address:				
3. Address for correspondence:				
Email:	Mobile N	Jo		
4. Qualification: ME/MTech (Specialization) Date	of Birth:	
5. Faculty for Doctoral program: -				
6. Name of Supervisor:				
Email:	Mobile No. :			
7. Name of Co-Supervisor if any:				

Email: Mobi	le No
8. Topic of Research:	
9. NOC from Employer/Higher Authority not less that	an Head of the Institutions:
10. Ph.D. qualifying Entrance Test: GATE/PET/SE	T/JRF
(a) Roll No./Seat No	_
(b) Date & Year of passing:	
(c) Percentage/Marks Obtained:	
11. List of documents enclosed:	
 Attested true copies of the mark list / Degree certic Candidate who has passed the qualifying examinate University, Gadchiroli should submit an original Eligic Gadchiroli. If the candidate belongs to the Backward Communenclosed. Incomplete application will not be accepted under a *Direction No. 162 of 2013, para 5) b) clauses i to ix 	ion from any University other than Gondwana ibility Certificate from Gondwana University nity, copy of caste certificate also should be
Place : Date :	
(Signature of the Candidate)	(Signature of the Guide/Co-Guide)

UNDERTAKING OF THE CANDIDATE

I Mr./Ms	, promise to abide by the discipline of the institute and
following rules and	regulations,
1. I will pay the La	ab retention and term fees regularly before 15th January of every year.
2. I aware that Lab applicable for me	retention and term fees may change as per the policies of the institute which will be.
3. I will submit my and 1-15 July)	progress report duly signed by the supervisor after every six months (1-15 Januar
4. My registration of the institute.	will be liable for cancellation for any misconduct or violate the rules and regulation
Place:	Signature:
Date:	Name :

COMMENTS OF THE EXPERT COMMITTEE

Mr./Ms	has presented his j	proposed work and the comments are as follows,
Name of Expert	Comment	Signature
1	- Approved / Reject	
ENDOR	SEMENT OF THE HEA	AD OF THE DEPARTMENT
To Principal Govt. College of Engineerin	g Chandrapur	
	Research	ary facilities which are available in this department. Laboratory may be allotted to Mr./Mswork under Gondwana University, Gadchiroli
 Total number of sea 	its sanctioned in the Laboration and idates presently working	ratory :
Date:		Signature:
		Office Seal:
ENDORSI	EMENT OF THE HEAD	CHLR GCOE CHANDRAPUR
Research Laborator Mr./Ms University, Gadchiroli	y of as working place	Department is allotted to e for his /her research work under Gondwana
Date:		Signature:
		Seal: