

कार्यालय अधिष्ठाता शोध व विकास एवं प्रोफेसनल प्रैक्टिसेज
मदन मोहन मालवीय प्रौद्योगिकी विश्वविद्यालय
गोरखपुर।

आवश्यक सूचना

शैक्षणिक सत्र 2025-26 के आड सेमेस्टर मे नव प्रवेशित Wating List के शोध छात्रो को सूचित किया जाता है कि दिनांक: 15.08.2025 से 18.08.2025 तक सामर्थ पोर्टल के माध्यम से फीस जमा करने की कार्यवाही पूर्ण कर ले, अन्यथा शोध छात्रों का प्रवेश से वंचित कर दिया जायेगा। जिसकी जिम्मेदारी छात्र के स्वय की होगी।

Syadav
14/8/2025

(डा० सत्य प्रकाश यादव)

सह-अधिष्ठाता शोध व विकास एवं प्रोफेसनल प्रैक्टिसेज

R

(डा० नवदीप सिंह)

अधिष्ठाता शोध व विकास एवं प्रोफेसनल प्रैक्टिसेज

पत्राक/मा०प्रौ०वि०/अधि०शो०एवंवि०एवंपी०पी०/INC_166/113 /2025

दिनांक: 14 अगस्त, 2025

प्रतिलिपि: निम्न को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

1. समस्त विभागाध्यक्ष।
2. वेब मास्टर को विश्वविद्यालय की वेब साईट पर अपलोड हेतु।
3. वै० सहायक कुलपति को मा० कुलपति महोदय के सादर अवलोकनार्थ।

Syadav
14/8/2025

(डा० सत्य प्रकाश यादव)

सह-अधिष्ठाता शोध व विकास एवं प्रोफेसनल प्रैक्टिसेज

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अधिष्ठाता शोध व विकास एवं प्रोफेसनल प्रैक्टिसेज



MADAN MOHAN MALVIYA UNIVERSITY OF TECHNOLOGY
GORAKHPUR-273 010, INDIA

Credit Registration Form
Odd/Even Semester, Session 2025 - 2026

Name of PhD Scholar:Registration Number:
Semester:Full Time/Self Financed:
Department:Mobile No:
Email id:Group Name:
FEE Details: (Amount):
Transaction No with ate:.....
Hosteller / Dayscholar:
Broad area of Research:
ABCID:
Adhar No.: :

I have been asked by my supervisor(s) to undertake the following courses/Subjects in connection with my PhD Course Work / Credits Registration.

S. No.	Name of Subject	Subject Code	Credits
1.			
2.			
3.			
4.			

Signature of Candidate

Recommended & forwarded by

Name & Signature
Supervisor

Name & Signature
Co-Supervisor

Name & Signature
Co-Supervisor

The above courses are relevant and beneficial for research work of above research scholar

Signature of Head of the Department with seal
Forwarded for Approval

Signature of the Dean, R&D and PP



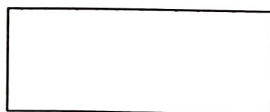
MADAN MOHAN MALVIYA UNIVERSITY OF TECHNOLOGY
GORAKHPUR-273 010, INDIA

Academic Registration Form, Odd Semester Session 2025 - 26

Name		Roll Number	Office use Only	Photo
Course		Branch		
Reference Number/ Form Number/Application no.				
UGC/CSIR-NET JRF or any other National Level Exam qualified	Yes	No		
If Yes : Name of the Exam & Year				
Sem. (Year)		Date of Birth		
Admit Card Roll No.		Allotted Category		
Mode Of Admission University Fellowship / Self-financed/ Sponsored		Gender		
Religion		Hosteller/Day Scholar		
Minority		Blood Group		
Medical History, if any				
Student Mobile No.		Parents Mobile No.		
Father's Name		Mother's Name		
Student's E-mail		Aadhar No.		
ABCID				
Permanent Address		Subjects Selected	Previous Years' Credit Cleared or Not (Yes/No) Attach result of previous year	
Details of Local Guardian, if any (Name, address and phone no.)				

Declaration by Student: It is to certify that all my information/details furnished by me in this registration form and for this admission are correct. In case of any information given by me being found incorrect at any stage, the University reserves the right to cancel my admission. I also undertake that I shall not involve myself in any act of ragging, smoking, use of liquor, misconduct, strikes damage to the University assets and other prohibited activities during the study in the University falling which University may cancel my admission and take necessary action. I shall not be undertaking any employment unless permitted by university and shall abide by the respective Ordinance and orders of the University as enforced from time to time.

Left Hand Thumb Impression



Forwarded for registration.

Signature of the Student

Signature of HOD

Fee Details		Hostel Details	
Fee Details for each Academic Year		Name of the Hostel	
First Year		Room No.	
Second Year		Mess Fee Details	
Third Year			
Fourth Year			
Current Year Fee Details			
Challan /DD No./ Transaction No. :			
Date :			
Bank :			
Amount			
Sig. & Seal of Account Official		Sig. & Seal of Hostel Official	

Signature of Dean of Student Affairs

Signature of Dean of R & D and PP

ACKNOWLEDEMENT SLIP

Mr./Ms.		Registration No.		Sem. (Year)		Course	
Branch		Hostel Name		Has been provisionally registered on			
Subject selected							

Signature of Dean of Student Affairs

Signature of Dean of R & D and PP