



APPLICATION FORM FOR

Ph.D PROGRAMME IN MANAGEMENT 2024

Affix a recent Passport size photograph

APPLICATION ID -----

FORM SERIAL NUMBER -----

ITM Ph.D Programme -----

Academic Year -----

Applicant's Personal Details

Title	
First Name	
Middle Name	
Last Name	
Mobile No.	
Email ID	
Date Of Birth	
Gender	
Nationality	

Address Details

Is Permanent Address Same as Communication Address: NO		
	Communication Address	Permanent Address
Address Line 1		
Address Line 2		
Country Name		
State Name		
District Name		
City Name		
Pin Code		

Your area of specialization for Ph.D Programme (Tick any 1) :

General Management
Economics
Entrepreneurship
Finance & Accounting
Marketing
Organizational Behavior and Human Resource Management
Production and Operations Management
Business Analytics
Digital Media and Marketing
Retail Marketing
Sustainability
Health Sciences
Hotel Management
Design and Media
Others Pl specify

Which field of study are you interested in? Give reasons:

A typed copy of abstract of your research [in about 1500 words] on the proposed area of study in the following format should be attached)

- (a) Specialization of the broad field of study
- (b) Introduction to the specific problem/area of interest (Current issues, importance, and rationale for the problem)
- (c) Research/Work experience in that area if you have any
- (d) Reading you have done in that area/motivation or importance of the problem

Educational Qualifications				
	10 th	12 th	Graduation	Post-Graduation
Institution				
City				
Mode of Education				
Board/University				
Stream				
Degree				
Year of Passing				
Marking Scheme				
Percentage/C GPA				

Additional Qualifications				
	Type of Qualification	Name of the Institution	Year of Completion	Percentage of Marks
1				
2				
3				
4				

Entrance Test – NET / ITM Test
NET if applicable – Score _____

Work Experience						
	Company	Designation	From Year	To Year	Monthly Remuneration	Reason of Leaving
1						
2						
3						
Total Period of Work Experience (In Months):						

Please mention the names and designations of two academic referees who can testify to your ability to pursue the Ph.D.		
	Referee 1	Referee 2
Name		
Designation		
Email Address		
Capacity in which known		
Phone no		
Organisation		

In case of RTGS/NEFT transfer, provide the following details for Registration fee of 2000/-	
Name of the Applicant	
Bank Name	
UTR Number	
Date of Transfer	
Amount of Transfer	

Tick mark if you have enclosed the following documents in support of your application. (Only attested copies need to be attached to the application. Candidates will be required to produce original certificates and testimonials of Degrees and Diplomas only at the time of interview.)	
Copy of a document giving proof of Date of Birth (e.g., Birth Certificate, School Leaving Certificate, etc.)	
Class X Marksheet	
Class XII Marksheet	
Two Photograph	
Certificate Copy of Bachelor's Degree	
Copy of Bachelor's Degree Marks/ Grade for all Semesters	
Certificate Copy of Master's Degree	
Copy of Master's Degree Marks/ Grade for all Semesters	
Copy of M.Phil. Degree Certificate (if Applicable)	
Research Abstract	
Copy of Work Experience Certificate	
Demand Draft/RTGS details	
Adhar Card/ Pan Card/ Driving License/ Voting Card	
Any Other (PI specify)	

Declaration
<p>The admissions committee of ITM has final authority over all admission matters. All disputes pertaining to matters of admission and its terms and conditions are subject to Mumbai jurisdiction and no other court shall have jurisdiction in this matter.</p> <p>I hereby certify that the above information is true to the best of my knowledge. I authorize ITM Skills University and any of its employees to use the information contained in this application in any manner it's seems necessary for the purpose of admission into its programs.</p>

Applicants Signature	
Date	