

E-mail ID:

नैनो विज्ञान एवं प्रौद्योगिक संसथान

(विज्ञान एवं प्रौद्योगिकी विभाग, भारत सरकार का एक स्वायत संस्थान)

INSTITUTE OF NANO SCIENCE & TECHNOLOGY

An Autonomous Research Institute of Department of Science and Technology, GOI) **Knowledge City, Sector 81, S.A.S Nagar - 140306, Punjab**

APPLICATION FORM

(For Admission to Ph.D. Programme - JANUARY 2026 Session)

CH	HECK (V) THE UNIT WHERE YOU WANT TO APPLY FOR PI	н.р.
1	. Chemical Biology Unit ()	
	2. Energy & Environment Unit ()	
3	3. Quantum Materials & Devices Unit ()	
If	applying for more than one unit, fill in separate application form for each	unit
	(Please fill the form in BLOCK CAPITAL LETTERS only)	
	For Office use	Affix latest colour
Application No: P	PhD/JANUARY-2026/	Passport size Photograph here
		r notograph nere
Date of receipt of	Application:	
Name of the Ap	oplicant Mr./Ms.	
(In block CAPI	•	
•		
. Tamer Sivame.		
. Mother's Name	:	
	5. Date of Birth:	
. Gender.	J. Date of Billi.	
. Marital Status: _	7. Spouse's Name (If Married):	
	to GEN/ SC/ ST/ OBC-CL/ OBC-NCL/ PH category*/EWSe self-attested photocopy of the certificate, if applicable)	
·		
. Permanent Au	dress (Please enclose self-attested photocopy of the address proof)	
State:	Pin code:	
Telephone and I	Mobile No.	



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	Score Details (Please p E/ GPAT/ JGEEBILS Test		examination		enclose duly self-attes Qualifying Year/Month	
	s of academic record s -Attested photocopies of Degree/ Exam (with discipline)				ed) Class/Grade/Rank	Subjec Take
	other fellowship/ scho	larship/ qualifi ate sheet.	ications obta	ined other tl	nan covered in the for	m? If yes



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14.	Research/	Industrial	l experience ((please	provide de	tails):-
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eligible* for further consideration by the Screening Committee.

Sr. No.	Organization	Post Held	Scale of pay/ Pay Band and Grade Pay	Duration (Exact dates to be given)	Total period (in years)	Nature of duties
Deta	t.	es under who	om the candidat	te has worked or stud Name: Designation: Institute:	lied	
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elepho	one No:			Telephone No:		
elepho				E-mail ID:		
ereby of irect v	declare that all the with any unlawfulion of my admission	DEC ne particulars l organization	CLARATION BY furnished above n is forbidden. I		and that my as	ssociation direct nation may lead
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Signature of the officer in charge of Admission



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Checl	klist of Enclosures by Ph.D. Aspirants. Tick ($$) the boxes.	
1. 2.	Photograph duly pasted on the application form.	
3.	Proof of date of birth	
4.	Self-attested photocopies of all certificates, degrees and	
	Mark sheets from High school onwards	
5.	Self-attested photocopies of exam qualified at national level	
	(UGC/ CSIR NET/ GATE/GPAT/ Other similar examinations)	_
6.	Self-attested photocopy of valid reserved category certificate from	
	Competent authority if applicable (SC/ST/OBC (non-creamy layer)/PH/EWS)	
7.	Self-attested photocopy of experience certificate if any	
	Please make sure that all the relevant enclosures are attached with the application form. Incerejected	omplete applications



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ONLINE FEES TRANSFER DETAILS OF INST MOHALI **ARE AS FOLLOWS:**

ACCOUNT NAME	DIRECTOR, INST MOHALI
BANK NAME	CANARA BANK
ADDRESS	SECTOR-64, PHASE-10, MOHALI-160062
TYPE OF ACCOUNT	CURRENT ACCOUNT
ACCOUNT NO.	2452201001102
IFSC CODE	CNRB0002919
MICR CODE	160015003
SWIFT CODE	CNRBINBBFFC

THE FEES TRANSFER DETAILS

CANDIDATE NAME	
TRANSACTION ID	
DATE OF FEES /AMOUNT TRANSFER	
AMOUNT TRANSFER	
PURPOSE	APPLICATION FEES FOR Ph.D. PROGRAMME
SESSION	JANUARY 2026