



OFFICE OF THE CONTROLLER OF EXAMINATIONS
FAKIR MOHAN UNIVERSITY
VYASA VIHAR, NEW CAMPUS, BALASORE-756089 (ODISHA)
Email: dycooffice@gmail.com

Letter No: FMU/ Ph.D./ Misc/ 12/ 2023/ 7533

Date: 11-8-2023

NOTICE

The approved supervisors of Fakir Mohan University/ its affiliated Colleges/ recognized Institutes are requested to submit the vacancy position of Ph. D. scholars as on 01.08.2023 in the given format (copy attached) to the undersigned through post/ in person by 25.08.2023 positively for admission into Ph. D. programme during the session 2023-24. The vacancy positions furnished after 25.08.2023 shall not be considered for this academic session.

This may be attended on top priority.

By Order of Vice Chancellor

Dy. Controller of Examinations

Memo No: 7534

Date: 11-8-23

Copy forwarded to Heads/ Coordinators of all P.G Depts. for information with a request to circulate among the faculties and all approved guide of their respective Dept./ subject.

Dy. Controller of Examinations

Memo No: 7535

Date: 11-8-23

Copy forwarded to Principals of all affiliated Colleges/ Institutions for information with a request to circulate among the faculties of their respective College/ Institution.

Dy. Controller of Examinations

Memo No: 7536

Date: 11-8-23

Copy forwarded to P. A. to Vice Chancellor/ Chairman, P.G Council/ Steno to Registrar/ Controller of Examinations for information.

Dy. Controller of Examinations

Memo No: 7537

Date: 11-8-23

Copy forwarded to Officer in Charge of website for information with a request to upload the same in the University website for general information.

Dy. Controller of Examinations

VACANCY POSITION FORMAT (Ph. D.)

Name of the Supervisor:

Designation:

Details of Institution:

Subject:

Contact details (Address, Mobile No & Email ID):

Date of Superannuation:

Details of the approval as a Guide/ Co-Guide in F. M University:

(Enclose a copy of the Notification/ Letter):

Details of the currently registered Ph. D. scholar under my supervision as Guide/ Co-Guide:

(Including those registered at other Universities as well)

Sl. No	Name of the registered scholar	Subject	Date of Registration	Reg. No.	Act as Guide / Co-Guide	Name of the University/ Institutions
1						
2						
3						
4						
5						
6						
7						
8						

Vacancy Information:

Current vacancy position (in Nos.)	Number scholar(s), the guide is willing to take during the session	Specialization(s) in which the guide wants to take scholar(s) during the session

I hereby declare that the information furnished above is true to the best of my knowledge.

Full Signature of the Supervisor

Forwarded by the HOD/ Coordinator/ Principal/ Director