



क्रमांक/पी.एच.डी./2022/6516

जबलपुर, दिनांक 23/11/2022

अधिसूचना

मध्यप्रदेश आयुर्विज्ञान विश्वविद्यालय जबलपुर से संबद्ध महाविद्यालयों में अध्ययनरत पी. एच. डी. पाठ्यक्रम प्रवेश वर्ष 2019-20 के समस्त संकाय के सभी पात्र अभ्यर्थियों की थीसिस की प्रति PDF Format में अधिकतम 5000KB size, Pen Drive में एवं 10 हार्ड कॉपी महाविद्यालय के माध्यम से निर्धारित तिथि अनुसार विश्वविद्यालय में जमा करवाया जाना आवश्यक है।

थीसिस की प्रति Mail ID: phdmpmsu@gmail.com पर प्रेषित किया जाना सुनिश्चित करें।

तिथि एवं फीस विवरण निम्नानुसार:-

क्र.	विषय	महाविद्यालय में थीसिस जमा करने की तिथि	महाविद्यालयों के माध्यम से विश्वविद्यालय में थीसिस जमा करने की तिथि	फीस
01	Ph.D. All Subject	23/07/2022 से 08/12/2022 तक	19/12/2022	10000.00

NOTE:

- थीसिस फीस MP Online के माध्यम से जमा करवाई जाना सुनिश्चित करें एवं जमा की गई फीस का प्रिंट/10 हार्ड कॉपी एवं Pen Drive के साथ निर्धारित तिथि में विश्वविद्यालय में जमा कराया जाना आवश्यक है।
- Plagiarism नहीं की गई है से संबंधित प्रमाण पत्र संलग्न किया जाना आवश्यक है। प्रमाण पत्र पर अधिष्ठाता/प्रधानाचार्य/विभागाध्यक्ष/थीसिस गाईड एवं को-गाईड के हस्ताक्षर आवश्यक है।
- प्रोफार्मा अनुसार Certificate थीसिस में संलग्न किया जाना आवश्यक है। (प्रोफार्मा संलग्न)
- सभी पात्र अभ्यर्थियों को 6 माह प्रोग्रेस रिपोर्ट की प्रति विश्वविद्यालय में जमा कराया जाना आवश्यक है।
- निर्धारित तिथि के पश्चात् थीसिस स्वीकार्य नहीं की जावेगी।

(माननीय कुलपति महोदय द्वारा अनुमोदित)

कुलसचिव

म.प्र. आयुर्विज्ञान विश्वविद्यालय
जबलपुर

पृ.क्रमांक/पी.एच.डी./2022/6516-A

जबलपुर, दिनांक 23/11/2022

प्रतिलिपि:- सूचनार्थ एवं आवश्यक कार्यवाही हेतु।

- कुलपति/कुलसचिव कार्यालय, म.प्र.आ.वि.वि., जबलपुर।
- परीक्षा/लेखा शाखा, म.प्र.आ.वि.वि., जबलपुर।
- संबंधित समस्त महाविद्यालयों की ओर सूचनार्थ प्रेषित।
- स्थानीय आवक शाखा, म.प्र.आ.वि.वि., जबलपुर।
- आई.टी. शाखा को अधिसूचना जारी करने हेतु।
- बिजनिस हेड एम.पी. ऑनलाईन भोपाल।

उपकुलसचिव

म.प्र. आयुर्विज्ञान विश्वविद्यालय
जबलपुर

- (vi) Name of Examination: PhD:
 (vii) Name of Subject/specialty:
 (viii) Name of Faculty:
 (ix) Admission Year (Academic Year):
 (x) Completion Year (Academic Year):
 (xi) Title of the Thesis:

8. The second page of the Thesis shall be as under:

- 1 Madhya Pradesh Medical Sciences University, Jabalpur.
 2 Name of the Examination: Doctor of Philosophy (PhD)
 3 Name of the Faculty:
 4 Name of the Subject/Speciality:
 5 Admission Year(Academic Year):
 6 Completion Year(Academic Year):
 7 Title of the Thesis:

Form A to ANNEXURE – 7
 (to be included in the Final Thesis)

Declaration by the Student and Guide

I, Dr/Mr/Ms hereby declare that, my Final Thesis entitled

 has been prepared under the supervision and guidance of Dr
 and that, if at any stage, it is found or reported that the material quoted/referred in my Final Thesis is copied from any other source/author/researcher and found that I have indulged in PLAGIARISM, I shall be held solely responsible for such an act and the University shall withdraw my PhD Degree (even if awarded) or shall not process my Final Thesis for further evaluation and examination, as the case may be.

Date:

Place

Signature & Name of the Student

Counter-signed by the Guide of the Student

Date:

Place

Signature & Name of the Guide

Certificate from Guide

This is to certify that, the Thesis entitled

 has been prepared by Dr/Mr/Ms..... under my direct
 supervision and guidance, in partial fulfillment of the regulations for the award of the degree of Doctor of
 Philosophy(PhD), in the subject of, under the faculty of

I have checked his/her work on the subject from time-to-time. I am satisfied regarding the authentication of
 his observations, clinical material and experimentation in this Thesis and it conforms to the Standards of Madhya
 Pradesh Medical Sciences University, Jabalpur. I also certify that his/her attendance at department is at par as
 prescribed in the norms by the University and it fulfills all other terms and conditions laid down by the University
 in the concerned Direction/rules. His/Her six monthly progress reports are satisfactory in nature and submitted to
 the University as follows:

1. First Report No dated
2. Second Report No dated
3. Third Report No dated
4. Fourth Report No dated
5. Fifth Report No dated
6. Sixth Report No dated

I have great pleasure in forwarding it to Madhya Pradesh Medical Sciences University, Jabalpur.

Date:

Place:

Signature and Name of Guide/Supervisor

Certificate from Co-guide (if any)

This is to certify that, the Thesis entitled

 has been prepared by Dr/Mr/Ms..... under my
 direct supervision and guidance, in partial fulfillment of the regulations for the award of the degree of Doctor of
 Philosophy(PhD) in the subject of, under the faculty of

I have checked his/her work on the subject from time to time. I am satisfied regarding the authentication of
 his observations, clinical material and experimentation in this Thesis and it conforms to the Standards of Madhya
 Pradesh Medical Sciences University, Jabalpur.

I have great pleasure in forwarding it to Madhya Pradesh Medical Sciences University, Jabalpur.

Date:

Place:

Signature and Name of Co-guide/Supervisor

Certificate by Head of Recognized Place of Research (on Letter-head)

This is to certify that, the Thesis entitled.

 has been prepared by Dr/Mr/Ms under the direct
 supervision and guidance of Dr
 Designation:
 Department: in partial fulfillment of the regulations for the
 award of the Degree of Doctor of Philosophy (PhD) in the subject of under the
 faculty of We have great pleasure in forwarding it to Madhya Pradesh Medical
 Sciences University, Jabalpur.

Date:
 Seal:

Signature, Name and stamp
 Head of the Department

Signature, Name and stamp
 Principal/Dean/Head of Center

MADHYA PRADESH MEDICAL SCIENCEUNIVERSITY, JABALPUR

ORDINANCE NO: 9/2014 - REGIONAL CO-ORDINATION CENTER

1. Short title and commencement.— (1)This Ordinance may be called the Madhya Pradesh Ayurvedic Vishwavidyalaya (constitution ,power and duties of regional co- ordination centre) Ordinance, 2014;

(2) This shall come into force with effect from the date of publication in the Madhya Pradesh Gazette.

2. Definitions.—in this statute, unless the context otherwise requires;

- (a) "Act" means the Madhya Pradesh Ayurvedic Vishwavidyalaya Act, 2011
- (b) "Employee" means every whole-time officer, teacher or other employee of the University appointed permanently to a substantive post and includes those appointments on contract for a definite period of not less than three years and persons whose services have been lent to the University by Government;
- (c) "Ordinance" means the Ordinance made under the provisions of Section 38 and 39 of the Madhya Pradesh Ayurvedic Vishwavidyalaya Act, 2011
- (d) "Section" means Section of the Act;
- (e) "State Government" means the Government of Madhya Pradesh;
- (f) Words and expression used but not defined in this statute shall have the meaning as assigned to them in the Act.

3. Medical Science University shall extend to whole of M.P. through its Regional Centers. These centers shall facilitate smooth operation of university activities and geographical convenience of students and affiliated institutions of the university.

4. Regional Centers have to face technological and societal challenges, so it should have reputation for providing quality, students oriented education in a professional and friendly environment giving them the best possible opportunity for future success.

5. The man power of regional centers can be appointed on contractual basis as and when required by the registrar of the university, persons appointed so will not be eligible for regularization in the university services, and they will have to furnish an undertaking regarding this. Such appointed persons will be given remuneration as decided by the regulations from time to time by the university.