

**Name : JARIWALA SAUMYA NIRAV****Reg No. : T1643223E****Home University**

**Student Category\*** India Connect  
**Home University Country\*** India  
**Home University\*** Dhirubhai Ambani Institute of Information and Communication Technology  
**Qualification to obtain at Home University\*** Bachelor  
**Enrolment period in Home University\*** From 07-2014 to 04-2018  
**Home Faculty/School\*** Engineering  
Major of Studies at Home University\* Information and communication technology  
**Equivalent NTU Programme** ENGINEERING

**Personal Information****Personal Particulars**

**Title\*** Mr  
**Full Name\*** JARIWALA SAUMYA NIRAV  
**Last / Family Name\*** JARIWALA  
**Given 1st Name\*** SAUMYA  
**Middle Name\*** NIRAV  
**Gender\*** Male  
**Date of Birth(DD-MON-YYYY)\*** 25-Sep-1996  
**Country of Birth\*** India  
**Citizenship\*** Indian  
**Are you a Permanent Residence of Singapore?\*** No  
**Race\*** Indian  
**Marital Status\*** S  
**Passport No./ Identity Card No.\*** J9019289

**Address**

**Permanent Home Address\***  
**Street\*** E-802 SUN RESIDENCY, ADAJAN  
**City\*** SURAT  
**State/Province\*** GUJARAT  
**Postal Code\*** 395009  
**Country\*** India  
**Mailing Address\***  
**Street\*** E-802 SUN RESIDENCY, ADAJAN  
**City\*** SURAT  
**State/Province\***

**Postal Code\*** GUJARAT  
395009  
**Country\*** India

**Contact Information**

**Home Telephone Number\*** 02612743315  
**Mobile Telephone Number\*** 9924716927  
**Fax Number\***  
**E-mail Address\*** saumya259@gmail.com

**Academic Qualification  
Completed education**

Name of Institution	From(YYYY)	To(YYYY)	Qualification Obtained
---------------------	------------	----------	------------------------

Name : JARIWALA SAUMYA NIRAV

Reg No. : T1643223E

**Mode,area and duration of study****Research**

<b>Research Dates(DD-MM-YYYY)*</b>	from 08-May-2017 to 15-Jul-2017
<b>Choice #1</b>	
<b>Research Title*</b>	Multi-Scale Search Algorithms For Black-Box / Derivative-Free Optimization
<b>Name of School/College*</b>	School of Computer Science and Engineering
<b>NTU Supervisor*</b>	Assoc Prof? Suresh Sundaram
<b>Choice #2</b>	
<b>Research Title*</b>	Information extraction from Text
<b>Name of School/College*</b>	School of Computer Science and Engineering
<b>NTU Supervisor*</b>	Assoc Prof Chng Eng Siong
<b>Choice #3</b>	
<b>Research Title*</b>	Classification of skin cancer from skin lesion images
<b>Name of School/College*</b>	School of Computer Science and Engineering
<b>NTU Supervisor*</b>	Prof Jagath C Rajapakse

**Source of Finance**

<b>Source Of Finance*</b>	Scholarship
<b>Full Name of Awarding Organisation*</b>	NTU India connect research intership programme
<b>Duration (MM-YYYY)*</b>	from 05-2017 to 07-2017
<b>Amount of Award*</b>	

**Details of Employment**

Year	Full or part-time	State occupation and description of experience	Employer and place of employment
------	-------------------	--	----------------------------------

**Additional Information****Exchange/Non-graduating student**

**Have you ever been an overseas exchange/non-graduating student of the National University of Singapore/Nanyang Technological University/Singapore Management University? \***

No

**If yes, state year(s) of attendance and course(s) taken**

**Have you entered Singapore using another passport previously?\***

No

**If yes, please state passport number**

**Health Declaration**

**Do you have any physical illness, or currently undergoing any medical treatment/been treated/been diagnosed of any illness which may affect your studies? \***

No

**If yes, please state nature of illness**

**Have you ever been hospitalized? \***

No

**If yes, please give details**

**Period of Hospitalization: From (DD-MM-YYYY) to -- (DD-MM-YYYY)**

**Reason for Hospitalization:**

--

**Are you currently taking any medication (including OTC and inhalers)? \***

No

**If yes, please list the medication(s)**

**Do you have any chronic (long-lasting or persistent) medical condition that requires treatment or medication? \***

No

**If yes, please have your physician prepare a summary of your treatment that includes the following:**

- Condition being treated
- Type of Medicine
- Physician's address and phone number

The summary must be produced upon request. Please note that it is IMPORTANT to make known your medical conditions (if any).

**Criminal offence**

**Have you been convicted of any criminal offence by a Court of Law in any country? \***

No

**If yes, provide particulars of offence**

**Name : JARIWALA SAUMYA NIRAV****Reg No. : T1643223E****Emergency Contact  
Personal Particulars**

<b>Title*</b>	Dr
<b>Full Name*</b>	NIRAV JARIWALA
<b>Last Name/Surname*</b>	JARIWALA
<b>Given 1st Name*</b>	NIRAV
<b>Middle Name*</b>	B
<b>Relationship*</b>	Father

**Address**

<b>Mailing Address*</b>	
<b>Street*</b>	E-802 SUN RESIDENCY, ADAJAN
<b>City*</b>	SURAT
<b>State/Province*</b>	GUJARAT
<b>Postal Code*</b>	395009
<b>Country*</b>	India

**Contact Information**

<b>Home Telephone Number*</b>	02612743315
<b>Mobile Telephone Number*</b>	+919825124575
<b>Office Telephone Number*</b>	
<b>Fax Number*</b>	
<b>E-mail Address*</b>	drniravami@yahoo.com

**Attachment Photo/Transcripts**

<b>Submitted Photo</b>	<a href="#">View Photo</a>
<b>Submitted Transcripts</b>	<a href="#">Latest_transcript.pdf</a>
<b>Submitted Degree</b>	
<b>Submitted Passport</b>	<a href="#">passport.JPG</a>
<b>Submitted CV</b>	<a href="#">Saumya Resume.docx</a>
<b>Submitted Document</b>	

<a href="https://venus.wis.ntu.edu.sg/NG_APP/Pages/ViewApplication.aspx?AppNo=8E18EC577F0A1AFE31FA7BE8C">https://venus.wis.ntu.edu.sg/NG_APP/Pages/ViewApplication.aspx?AppNo=8E18EC577F0A1AFE31FA7BE8C</a>
---