

(For office use only)

IN BOXES ☐ WRITE WITH BLACK DOT PEN. CIRCLES ☐ TO BE DARKENED BY HB PENCIL ONLY.

SIDE-1

[illegible]

Please affix ticket size recent photograph.

DATE		MONTH	YEAR			
1	1	JAN	1	1	1	1
2	2	FEB	2	2	2	2
3	3	MAR	3	3	3	3
4	4	APR	4	4	4	4
5	5	MAY	5	5	5	5
6	6	JUN	6	6	6	6
7	7	JUL	7	7	7	7
8	8	AUG	8	8	8	8
9	9	SEP	9	9	9	9
0	0	OCT	10	10	0	0
		NOV	11			
		DEC	12			

[illegible]

MALE ☐

FEMALE ☐

UNRESERVED (General)	①
SCH. CASTE (SC)	②
SCH. TRIBE (ST)	③
OBC (Non creamy layer)	④
PHY. HANDICAP (PH)	⑤
MINORITY (M)	⑥

Ph.D.M.Phil. APP. FORM - 2018
ADMIT CARD

6. YOUR COMPLETE MAILING ADDRESS INCLUDING YOUR NAME. WRITE IN BLACK PEN AND IN CAPITAL LETTERS.

ADDRESS :

PIN CODE:

8. SIGNATURE OF
THE CANDIDATE

7. PHOTOGRAPH

ROLL NO. :

DISCIPLINE No.:

SUBJECT CODE :

EXAM APPLIED FOR

1. M. Ph.:

①

INSTRUCTIONS :
USE HB PENCIL ONLY TO DARKEN THE CIRCLES ○
DARKEN THE CIRCLES FULLY AS ●

- ERASE COMPLETELY TO CHANGE RESPONSES.
- DO NOT MAKE ANY STRAY MARKS ON THIS SHEET.

SIDE-II

DISCIPLINES		MOBILE NUMBER (1) :	MOBILE NUMBER (2) :
1. Science ○	4. Art ○		
2. Commerce & Management ○	5. Information Technology & Computer Science ○		
3. Education & Physical Education ○	6. Law ○		
SUBJECT CODE			

POST GRADUATION	DO YOU HAVE M.Phil.?	FEE PAID	RECEIPT NO. :
QUALIFYING (≥ 55% in PG for gen/obc) (≥ 50% in PG for sc/st/ph/vh)	YES ○	M.Phil. (Rs.1000/-) ○	
APPEARING ○	NO ○		

YOUR COMPLETE MAILING ADDRESS INCLUDING YOUR NAME. WRITE IN BLACK PEN AND IN CAPITAL LETTERS.	FOR OFFICE USE ONLY
NAME :	DATE OF EXAM :
ADDRESS :	SIGNATURE OF CANDIDATE :
PIN CODE:	SIGNATURE OF INVIGILATOR :

I do hereby declare that the all information provided by me on this form are true to the best of my knowledge and belief. I understand that any misrepresentation of facts will result in my dismissal from the programme. If admitted, I shall abide by all the rules and regulations of the University.

Date :

Name :

Signature :

DECLARATION BY THE APPLICANT

- I have filled the Name and address etc. carefully, correctly and truthfully.
- I hereby agree to the conditions set forth in the Rule Book and will abide by the instructions therein.
- I also affirm that I am the person whose details are given on this form.
- I declare that I possess / going to possess before the final selection the eligibility qualification for exam / exam I am applying for.
- I declare that all the statement given by me are true.

Date :

Name :

Signature :

DATE OF EXAM :