



**APPLICATION FORM**

Entrance Test for Ph.D. in .....

Please leave one box blank between words.

1- Name :

**(In capital letters)**                  
 (as per Hr. Sec./  
 Matriculation Certificate)

Affix self-attested recent passport size photograph

2 Date of Birth (as recorded in matriculation or equivalent certificate) : **D D M M Y YYY** Sex : **M F**

3 Category :      **GEN/SC/ST/OBC** **Physically Disabled (PD) - Yes/No**

4 Father's Name : \_\_\_\_\_  
 \_\_\_\_\_

5 Mother's Name : \_\_\_\_\_  
 \_\_\_\_\_

6 Address for Communication (in capital letters) (Please do not repeat name here) : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

7 Mobile No. :

8 Landline No :

9 Email :

10 Aadhar No.

11 Permanent Address (in capital letters) (Please do not repeat namehere) : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

12 EDUCATIONAL QUALIFICATION (Attach Self attested photo copies)

Examination Passed	Name of the Board/University	Year of Passing	Subjects Offered	Div./Grade	Max. Marks	Marks Obt.	% of -marks obt.

12 Details of Bank Draft

Name of the Bank	Issuing Branch	Draft Number	Date of Issue	Amount (Rs.)

13 Examination Centre (City) –  
 (Please mark tick (✓) at city  
 of the Examination Centre  
 and also write in Box

- 1. Sardarshahr (Raj.)
- 2. Jaipur (Raj.)
- 3. New Delhi

Note – University reserves right to change the Centre of examination in unavoidable circumstances

**DECLARATION**

- a. I, \_\_\_\_\_ hereby declare that the information furnished in this application is true, complete and correct to the best of my knowledge and belief and I understand that in the event of any information being found false or incorrect or any ineligibility being detected even after admission, my admission is liable to be rejected and legal action may be initiated and also the fee deposited by me will be forfeited.
- b. I have gone through the terms and conditions relating to the Ph.D.admission.
- c. I have noted that if my application is found incomplete/incorrect, the same is liable to be rejected summarily and no correspondence will be entertained.

Place :

Date :

Signature of Candidate

Note- Unsigned Application Forms will be rejected.

The particulars furnished by the candidate have been checked and verifies.

(Coordinator)

<b>FOR OFFICE USE ONLY</b>
1. Roll Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2. Examination Center:- .....
3. Date & Time of Examination:- .....
4. Subject:- .....
Coordinator