No.

CARH UAULHISTIY

Affix passport size photograph here

APPLICATION FOR ADMISSION Ph.D. Programmes

Department into which Admission is sought					1
1. Applicant's Name in Full (BLOCK CAPITALS)					l
Surname Mr./	/Miss/Mrs.			Name	
2. Whether hostel accommodation required					
(Please tick appropriate box)	Yes	No			
3. Date of Birth 4. R	egistration	110			
	8				
Date Month Year	No.	Yea	 r	University	v
5. (a) Caste (Please tick appropriate box)	(b)		-Caste		1
SC ST(P) ST(H) OBC MOBC	Others				
6. Particulars of Father/Guardian/Husband	(Rela	ation)			
Name	Phone No	0	(R)		(M)
	e-mail I	D			
Address					
District	State		Pin		
7. Permanent Home Address					
P. O	District		Pin		
8. Particulars of Local Guardian :	(Relation	on)			
Name	_ Phone No		(R)		(M)
	e-mail ID				
Address	_ P. O		Pin		
9. Blood Group					
10. Examination Passed (Beginning from H. S. L. C. or equiv					
	ulent)				
Name of Examination Name of University	/Board/	Roll	Year of	Class	% of

11. If employed, give particulars here

Date _____

Head Department of

(For Office Use Only)

Student No. ______Admitted _____

Signature & Date _____

Date of Admission

Joint Registrar (Academic) Dibrugarh University

Signature of Applicant

Application For Admission into the Ph.D. Programmes

No.

		To be submitted to the Head of the Department concerned on or before :
	Dibrugarh - 786 004	passport size photograph
	Programme :	here
	Department :	
	Session :	
. Applicant's Name in Full (BLC	OCK CAPITALS)	
Surname	Mr./ Miss. /Mrs	Name
. Father's Name :		
. Mother's Name :		
. Father's/Guardian's (if father is Name, Occupation and Addres		Occupation
. Address for correspondence :		
		Pin
Phone	(R)	(Mobile) e-mail
. Date of Birth : (Attach H. S. L. C. Certificate)	Day Month Year	7. Nationality :
. Sex : Male Fema	ele 9. Marital	Status : Married Unmarried
0. Blood Group		
1. Community : SC / ST(P)	/ ST(H) / OBC / MOBC	General 12. Religion :
(Attach certificate from competer	it authority)	
3. Where to reside ? At hom	e / University Hostel / Out side]
4. Are you employed ? Y (If yes, submit no objection certif	es No	
5. Are you on deputation ? Y	es No	

	16.	Name and F	Registration No.	of the U	University v	where registered	last. :
16. Name and Registration No. of the University where registered last. :		1	Biomenterra			and to Brothere	

17. Educational Qualification starting from H. S. L. C. or equivalent : (Attach attested copies of marksheets and certificates of all examinations)

Examination Passed	Board/Council/ University	Roll No.	Year of Passing	Div./ Class	Percentage of Marks	Subjects Taken
10th standard						
10+2						
10+2+3						
	istinction/medals/ arships, if any ficate)					

19. Any Extracurricular Activities (Mention the activities and furnish testimonials)

20. Are you differently abled (physically handicapped) ? (If yes, attach certificate from the competent authority)

	21	Are you und	lergoing any	course of study at pro	esent ? If yes, give details	
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UNDERTAKING

I declare that, if admitted, I shall abide by the Statutes, Ordinances, Rules, Regulations, Orders etc. of the Dibrugarh University that will be in force from time to time. I submit myself to the disciplinary jurisdiction of the Vicechancellor and other authorities of the University who may be vested with such powers under the Act, Statutes, Ordinances, Orders and the Rules that have been framed there under by the University.

I also declare that the information given above are true and complete to the best of my knowledge and belief and if any of them is found to be incorrect, my admission shall be liable to be cancelled and I shall be liable to such other disciplinary action as may be decided upon by the University.

Date :

Full signature of the applicant

For Office Use Only

Selected Provisionally Under

- 1. General Merit List
- 2. SC/ ST Quota

3. Reserved Quota

Chairman, Admission Committee

Head of the Department

Jt. Registrar (Academic)

Rejected

Remarks :

Yes / No

details.