



**APPLICATION FOR PRE-Ph.D REGISTRATION ENTRANCE TEST (2018-19)**

(TO BE FILLED IN BY THE CANDIDATE AND WRITE IN **CAPITAL LETTERS ONLY**)

NAME OF THE APPLICANT

DATE OF BIRTH (As recorded in Matriculation Certificate) 



 AGE 



 GENDER 











 NATIONALITY

FATHER'S NAME

MOTHER'S NAME

CASTE GENERAL  SC  ST  OBC  PHYSICALLY CHALLENGED  Y  N

EMAIL ID 



 AADHAR NO

CURRENT ADDRESS

CONTACT NUMBER I 



 CONTACT NUMBER II

SELECT STREAM / SUBJECT IN WHICH YOU WANT TO APPEAR 

1. ECONOMICS
2. ENGLISH
3. COMMERCE & MANAGEMENT

**DETAILS ABOUT POST GRADUATION EXAMINATION**

NAME OF EXAMINATION	NAME OF THE UNIVERSITY	YEAR OF PASSING	NAME OF SUBJECT	DIVISION / CLASS	PERCENTAGE OF MARKS	SPL. PAPER

**DECLARATION TO BE SIGNED BY THE CANDIDATE**

I declare that the information given above is correct and to the best of my knowledge. My Ph.D Registration is liable to be cancelled, if any of the information above is found to be incorrect.

**A fee of Rs. 500/- (non-refundable) is to be paid along with this Application Form.**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**SIGNATURE OF CANDIDATE**

**NOTE:**

Photo copy of certificates required to be attached

- (a) Showing date of birth
- (b) Marks obtained at Master Examination