

ACADEMIC DETAILS

1. CLASS X OR EQUIVALENT

YEAR OF PASS

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 BOARD

STATE

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MARKS

TOTAL MARKS	
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MARKS OBTAINED	
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% OF MARKS	
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2. 10+2 OR EQUIVALENT

GROUP

YEAR OF PASS

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 BOARD

STATE

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MARKS

TOTAL MARKS	
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MARKS OBTAINED	
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% OF MARKS	
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3. GRADUATION

YEAR OF PASS

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 COLLEGE

UNIVERSITY

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MARKS

TOTAL MARKS	
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MARKS OBTAINED	
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% OF MARKS	
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4. POST GRADUATION

YEAR OF PASS

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 COLLEGE

UNIVERSITY

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MARKS
DETAILS

YEAR/ SEMESTER	MAX MARKS	MARKS OBTAINED	% OF MARKS/ CGPA	MONTH & YEAR
I SEM				
II SEM				
III SEM				
IV SEM				
V SEM				
VI SEM				
TOTAL				

NET QUALIFIED:

YES	NO
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5. WORK EXPERIENCE

ORGANIZATION	DESIGNATION	TYPE OF WORK	FROM	TO

6. PUBLICATIONS: MENTION THE PUBLICATION IF YOU ARE THE FIRST OR SECOND AUTHOR ONLY (ATTACH SEPARATE SHEET IF NECESSARY)

SL. NO	TITLE OF THE PAPER/BOOK	JOURNAL/PUBLISHER	YEAR	VOL. & PP/ EDITION	CO-AUTHORS

7. FIELD OF INTEREST

**8. GIVE A BRIEF ABOUT YOUR MASTER'S DISSERTATION. (IN ABOUT 250 WORDS)
(ATTACH SEPARATE SHEET)**

**9. STATEMENT OF PURPOSE: (IN ABOUT 500 WORDS, DESCRIBE THE FOLLOWING)
(ATTACH SEPARATE SHEET)**

A) BRIEF DESCRIPTION OF THE PROPOSED WORK:

B) WHAT KIND OF IMPACT WILL YOUR RESEARCH HAVE ON SOCIETY?

C) HOW WILL YOUR RESEARCH CONTRIBUTE TO YOUR AREA OF INTEREST?

**10. LIST THE BOOKS YOU HAVE READ IN THE LAST 6 MONTHS TO A YEAR IN THE FIELD OF RESEARCH CHOSEN BY YOU, AND SUBMIT A REVIEW ON THE BOOK IN 150 WORDS
(ATTACH SEPARATE SHEET)**

11. PLEASE ATTACH A RESEARCH PROPOSAL NOT EXCEEDING 2 PAGES ALONG WITH THIS FORM.

12. PROVIDE THREE REFERENCES

(TWO OF WHICH SHOULD TALK ABOUT YOUR ACADEMIC ABILITY).

NAME:
OCCUPATION:
ADDRESS:
CONTACT NO.
EMAIL:

NAME:
OCCUPATION:
ADDRESS:
CONTACT NO.
EMAIL:

DECLARATION:

I hereby declare that all the particulars stated in this application form are true to the best of my knowledge and belief. I have read and understood all provisions of the admission procedure and agree to abide by them. In the event of submission of fraudulent, incorrect or untrue information or suppression or distortion of any fact like educational qualification, marks etc., I understand that my admission/degree is liable for cancellation.

PLACE:

DATE:

SIGNATURE OF APPLICANT