

10. Are you a student / Employee of the University: (Tick whichever relevant)

Yes/No	Student / Employee
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11. If so, give details of Department / Course in which Working / Studying:

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12. Work Experience (if any)

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13. Academic Record

Examination Passed	Subject	Institution / University	Year	Percentage
Secondary (X)				
Higher Secondary (XII)				
UG Degree (or first three years of Five year integrated courses)				
Diploma, if any				
PG, if any				
Any other				

DECLARATION BY THE APPLICANT

I hereby declare that all information given by me in support of my application are true, complete and correct to the best of my knowledge and belief and if any of them is found to be incorrect or false, 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.

Place:

Date:

SIGNATURE OF THE APPLICANT