



SANT GADGE BABA AMRAVATI UNIVERSITY, AMRAVATI

(Enrolment form for pursuing Ph.D. Programme)

See Under Ord. 1 of 2016 Clause B-2.2 (b)

	Acade	emic Year ::			
To,					
Assistant Reg					
Sant Gadge B	aba Amravati University,				
Amravati					
Details of Pay	yment for Enrolment	fee : Receip	t No		Date :
	Through: (Name of Researcl	ı Centre)		
Sir,					
above under Ord	ing to apply for the Ph.D. P l. 1 of 2016. I have already D. programme. I am herel	paid the requisit	e fees and will	ling to un	dergo the course
					(Surname
First)					
Date of Birth :	1 12 46 1				
•	usband Name/Guardian na	ame :			
Address					:
Caste :	Religion :	N	lationality :		
	(Detail of Qualifying	Examination) S	ubmit photoc	opies	
Qualifying Degre	ee : Aggregat	e Marks obtained	: out	of:	CGPA
Name of Univers	sity :				
	/Institution :				
Degree Passed :	Whet	her Migration att	ached? Yes/N	10	
Qualifying Test/	Examination passed : PET	/SET/NET/GATE	J/GPAT/M.Phil	İ	
Details of Test/I	Examination passed :				
Test/ Examination	Passing Year with date	Roll No.	Subje	ect	Marks obtained

DECLARATION

I hereby declared that the information given above is correct to the best of my knowledge
and collaborated with the documents furnished therein. I am aware that the provisions of the MPUA,
2016 and Ord. 1 of 2016 are applicable to me and I will abide by the same. I am also aware that the
rules relating to examination are mutantis mutandis applicable to the Ph.D. programme which I am
willing to pursue.

()	Above Information has been verified and found correct. Application is recommended for enrolment
Name and Signature of the Candidate	

Head, Research Centre Signature with Seal and Stamp