



SANT GADGE BABA AMRAVATI UNIVERSITY, AMRAVATI

(Enrolment form for pursuing Ph.D. Programme)

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

	Acade	mic Year ::		
	gistrar (Ph.D. Cell) raba Amravati University,			
	yment for Enrolment : Through : (l	fee : Receipt Name of Research (Date
given above und course work for	lling to apply for the Ph.D ler Ord. 1 of 2016. I have a the Ph.D. programme. I ar	llready paid the red n hereby furnishing	ne Research Cent quisite fees and w g the detail inforn	illing to undergo the nation as under –
Pirst) Date of Birth:	usband Name/Guardian na			(Surname
Caste :	Religion :			
	(Detail of Qualifying			
Qualifying Degr	ee : Aggrega	ate Marks obtained	d : out o	of:CGPA
Name of College Degree Passed :	sity: :/Institution: Whet Whet 'Examinationpassed: PET/	her Migration attac	thed? Yes/No	
Details of Test/I	Examination passed :	. , ,	•	
Test/ Examination	Passing Year with date	Roll No.	Subject	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 a found correct. Application is recommended for enrolment
()	recommended for enrolment
Name and Signature of the Candidate	

Head, Research Centre Signature with Seal and Stamp