

DIAMOND HARBOUR WOMEN'S UNIVERSITY Diamond Harbour Road, Sarisha, 24 PGS (South) -743368

Application Form for admission in <u>Master of Philosophy (M.Phil)</u> in _____(Dept.)

Name (in capital letters):	Affix a
Date of Birth:	passport
Marital Status: Nationality:	size photo
Religion: Category (please tick): UR/ SC/ ST/OBC-A/OBC-B	
Address of the applicant with Pin code:	
Present Address:	
Permanent Address :	
Phone Number:	
Email Id:	
Guardian's Name:	
Guardian's Occupation:	
Guardian's Address:	
Guardian's Phone Number:	
Relationship with Guardian:	

Particulars of Academic Career:

Examination	Board/ Council/ University	Subject(s)	Total Marks	Marks Obtained	Percentage	Remarks · (if any)
10 th Standard /						-
M.P						
12 th Standard /						
H.S						
Bachelor of Arts						
(Hons.)					-	
Master of Arts						
Others						

Declaration

All the above information is true as per my knowledge. If I am selected for admission I will abide by the Rules & Regulations of Diamond Harbour Women's University.

Date:

Full Signature of the Applicant

Submit supporting documents along with the application.

(FOR OFFICE USE ONLY)

Recommendation of the Board of Studies, in				
	Selection of Candidate for Master of Philosophy (M.Phil)			
Conside	ered the Application of			
	Master of Philosophy degree in	_(Dept.)		
Remar	ks:			
1.	Admission Test: Qualified/Not Qualified Marks obtained in written entrance examination:			
2.	We Interviewed the Candidate on			
	Marks obtained in Viva-voce- Total Marks secured (Including Written & Viva-voce)-			
3.	We have checked the under mentioned documents (please tick):			
	 Madhyamik/ Equivalent Examination Higher Secondary/Equivalent Examination Bachelor's Degree Master's Degree NOC from Employer (if applicable) Migration Certificate (if applicable) NET / SET / SLET Others 			
4.	Due Mark Sheets or Documents (if any):			
Recom	mendation of the Board of Studies: May be Admitted/ May not be admitted			
Signatu	are of the Internal Member(s) of the Board of Studies with Date:			
Signatu	are of the External Member (s) present in the Viva-Voce with Date:			
Signatu	re of the Convenor of BOS/ Head of the Department with Date & Seal:			

For Registrar's Office

Date of Admission:

Allotted Roll No (Enrollment No.):

Signature of the Office Assistant