

GEETANJALI UNIVERSITY

N.H.8, Bypass, Near Eklingpura Chauraha, Udaipur (Rajasthan) - 313001 Phone : +91 (0294) 2500000-6 ; Fax No. : +91 (0294) 2500007 ; www.geetanjaliuniversity.com [Established under Act No. 07 of 2012]

All India Pre-Ph.D. Entrance Examination - 2020-21 for Admission to DOCTORATE (Ph.D.) in Medical Sciences, Pharmacy, Dentistry & Physiotherapy

APPLICATION FORM

Form No.: GU/Ph.D.	/		Dorda Dorda					
To be filled in CAPIT	Paste Recent Passport Size Photograph (Do							
Course Name	not staple / pin the							
	Photo)							
1. Candidate's Name :								
2. Date of Birth 3. Gender :								
	D D M M Y Y		M F					
4. Marital Status Single Married 5. Nationality								
6. Category :	Gen SC ST	OBC Others						
7. (a) Father's /Husba	and's Nama							
7. (a) Faulet 8/Husba	and s Name							
(b) Madhaula Nasa								
(b) Mother's Name	; 							
8. Permanent Addres	is:							
CTD C. I.	T N N	M 1 3 N						
STD Code E-mail ID	Landline No.	Mobile No.						
9. Correspondence A	ddress (if different from abo	7e):						
STD Code	Landline No.	Mobile No.						
10. Educational Qual	lifications :							
Qualification Name of Institution		•	Year of Overall					
			Passing Marks (%) of Grade					
			of Graue					
1.								
2.								



Place : _____ Date : _____

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3.							
4.							
5.							
6.							
7.							
Note: * Please enclosed attested copies of 10th,12th, UG, PG mark sheets, Certificate of Internship, Registration Certificate, Teaching/Clinical Experience, Aadhar Card & NOC (For in job candidates). * Please enclosed Demand Draft of Rs. 5000/- drawn in favour of Geetanjali University payable at Udaipur. * Candidate can submit the form in person or via courier to the Dean PG Studies, Geetanjali University, Udaipur (Rajasthan) - 313001.							
DECLARATION BY THE APPLICANT							
 I hereby declare that the above information is true and complete to the best of my knowledge and belief. I am aware that if any information herein is found to be incorrect or incomplete my application form will be rejected/admission will be cancelled. I am aware of rules and regulations of the objective type competitive examination, and if I am found using unfair means or committing any irregularity, I can be expelled from the examination or my result can be cancelled by the Geetanjali University. 							
D.D. N	[0.	Amou	nt (Rs.)		Date of Issu	e	
Name of Bank & Branch							
Signature of Applicant							



Date:

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Annexure - 1*

Controller of Examination

Form to be retained at the Examination Centre

GEETANJALI UNIVERSITY

Udaipur, Rajasthan All India Pre-Ph.D. Entrance Examination - 2020-21

(All entries except Roll No. to b	Roll No.		
Name of Candidate: Father's Name: Full Postal Address:			Paste Recent Passport Size Photograph (Do not staple / pin the Photo)
	Signature attested		
Full Signature of Candidate (To be taken in the Exam. Hall)	ure of Candidate (To while filling form)		
	ETANJALI UNIVERSI Udaipur, Rajasthan Ph.D. Entrance Examina		21
(All entries except Roll No. to b	Roll No.		
Please admit:			
Son/Daughter ofAt the			Paste Recent Passport Size Photograph (Do not staple / pin the Photo)

^{*} Annexure-1 to be filled by the candidate and send back with original application form.