



**APPLICATION FORM FOR ADMISSION TO
POST GRADUATE PROGRAMMES 2023-24**

Note:

1. Applicants are required to be fully conversant with the Prospectus which contains Rules of admission, Instructions to candidates etc., before filling up the application.
2. Enclose copies of marks cards of all semesters in the qualifying degree exam, category/income certificates along with the application

PG. Programme applied for	
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1. Name of the Applicant (in Block letters)

2. Name of Father/Mother/Guardian

3. Occupation and total Annual Income of Father/Mother/Guardian

Occupation:	Annual Income:
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4. a) Place of Birth Village / Town Taluk District
State

b) Date of Birth (as in the S.S.L.C marks card or its equivalent)

Day:	Month:	Year:
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5. Personal Particulars:

Nationality:	Caste:	Gender:	Mother Tongue:
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6. AADHAR Number:

7. Under which Category Seat is Claimed? Please tick mark in the concerned box

SC	ST	Cat-1	II A	II B	III A	III B	GM	OUK	OU	Others

8. (i) Degree/Qualifying Examination Passed:

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(ii) Percentage of marks secured in the Qualifying Examination:

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9. Permanent Residential Address

Postal Address:

E-mail:

Telephone No:

10. Have you pursued Under Graduate Degree course in the University of Mysore or in any other recognized University in India in any other subject during the previous years? If so, furnish details.

University	Course Studied	Year of Admission	Total Marks	Marks Obtained	Percentage

Appeared for PG Entrance Exam 2023: Yes No

If Yes, mention your registration ID :
(that starts from 240.....)

Marks scored in Entrance Exam: out of

Fee paid details: Challan No:..... Amount:..... Date:

DECLARATION

1. I submit this application seeking admission to a Post Graduate Program. I declare that I read the rules and regulations in this regard.
2. I hereby solemnly and sincerely affirm that the statement made and information furnished in my application from and also in the enclosures thereto submitted by me are true. Should it, however, be found that any information furnished herein is untrue in material particulars, I realize that I am liable for criminal prosecution and the seat given to me shall be liable to be forfeited.

Place:

Date:

Signature of Applicant