

Office Copy

Register No:



**Pareeksha Bhavan, Mysore -5**

**HALL TICKET for Ph. D ENTRANCE TEST**  
(To be filled in by the candidates appearing for the Entrance Test)

- 1.Name of the Candidate (In Block Letters):
- 2.Broad area of Research/Subject intending to pursue research:
- 3.Department /College/Institution where you intend to carry on research:

Affix Stamp  
Size Photo

Signature of the Candidate

Signature of the Director of Research

Date:

..... CUT HERE.....

Candidate's Copy

Register No:



**Pareeksha Bhavan, Mysore -5**

**HALL TICKET for Ph D ENTRANCE TEST**  
(To be filled in by the candidates appearing for the Entrance Test)

- 1.Name of the Candidate (In Block Letters):
- 2.Broad area of Research/Subject intending to pursue research:
- 3.Department /College/Institution where you intend to carry on research:

Signed Passport  
Size Photo of  
the Applicant


Signature of the Candidate

Signature of the Director of Research

Date:

Application No

Application Form- A

UNIVERSITY  OF MYSORE

Pareeksha Bhavan, Mysore -5

APPLICATION FORM FOR APPEARING IN THE ENTRANCE TEST FOR Ph. D PROGRAMME IN.....

(Note: This form has to be filled by only those candidates appearing for Ph.D Entrance Test)

1. Name of the Candidate( in Block Letters):

Date of Birth:

Gender : Male/Female

2. Address for Communication:

Signed Passport  
Size Photo of  
the Applicant.

E-Mail.

Phone/Cell No.

3. Category: SC/ST/Cat-I/OBC/GM(Enclose the required caste certificate if reservation is claimed)

4. Details of Post-graduate Degree Examination passed/Appearing:

(Enclose the attested copies of Postgraduate Degree Marks Cards and certificate)

Post Graduate Degree and Subject	Year of Passing/ appearing	Percentage of Marks/Grade Secured	Specialization	University

5. Specify: (a) Broad Area of Research/Subject intending to pursue research

(b) Name of the Department /College/Institution where you intend to carry on research

6. Details of fee paid: Name of the Bank and Branch:

DD/Challan No.  Date  Amount

I certify that the information furnished is true to the best of my knowledge.


Date:

Place:

(Signature of the Candidate)

Application No

Application Form-B

UNIVERSITY  OF MYSORE

Pareeksha Bhavan, Mysore 570 005

APPLICATION FORM FOR Ph.D PROVISIONAL REGISTRATION IN.....

(Note: This form has to be filled by candidates intending to appear for Entrance Test and those who seek direct Provisional Registration for Ph. D with exemption from entrance test.)

1. Name of the Candidate( in Block Letters):

Date of Birth:

Gender: Male/Female

2. Address for Communication:

Signed Passport  
Size Photo of  
the Applicant.

E-Mail.

Phone/Cell No.

3. Category: SC/ST/Cat-I/OBC/GM:  (Enclose the required caste certificate if claiming reservation)

4. Whether applied for appearing in Entrance Test? : **Yes / No**

5. Whether cleared UGC JRF/UGC-CSIR JRF/GRE/ GATE/ NET /SLET ? : **Yes / No**

If yes, please specify : ..... (Enclose photo copy of the relevant documents duly attested).

6. Details of Post-graduate Degree Examination passed:

(Enclose the attested copies of Postgraduate Degree Marks Cards and certificate)

Post Graduate Degree and Subject	Year of Passing/ appearing	Percentage of Marks Secured	Specialization	University

7. Specify :(a) Broad Area of Research/Subject intending to pursue research.

(b) Name of the Department /College/Institution where you intend to carry on research.

8. Details of fee paid: Name of the Bank and Branch:

DD/Challan No.  Date  Amount

I certify that the information furnished is true to the best of my knowledge.

Place:

(Signature of the Candidate)

Date: