



INDIRA GANDHI NATIONAL TRIBAL UNIVERSITY AMARKANTAK (MADHYA PRADESH) - 484887

(A Central University established by an Act of Parliament)

*Space for
passport size
recent colour
photograph*

APPLICATION FORM

(Admission for Honours, B.Pharma, PG and D.Pharma Programmes at IGNTU)

| | | | | | | | | | | |
|---|------|--------------------------|--------|--------------------------|--------------|--------------------------|--|--|--|--|
| NAME OF THE CANDIDATE (IN BLOCK LETTERS) | | | | | | | | | | |
| 1. MOTHER'S NAME | | | | | | | | | | |
| 2. FATHER'S NAME | | | | | | | | | | |
| 3. GENDER | MALE | <input type="checkbox"/> | FEMALE | <input type="checkbox"/> | THIRD GENDER | <input type="checkbox"/> | | | | |
| 4. DATE OF BIRTH | DD | | MM | | YYYY | | | | | |

| 5. POSTAL ADDRESS | PERMANENT | CORRESPONDENCE | | | | | | |
|------------------------|-----------|--------------------------|--------|--------------------------|-----|--------------------------|-----|---|
| H.NO./APARTMENT | | | | | | | | |
| STREET /VILLAGE/TALUKA | | | | | | | | |
| POST OFFICE | | | | | | | | |
| DISTRICT/CITY | | | | | | | | |
| STATE | | | | | | | | |
| PIN CODE | | | | | | | | |
| MOBILE/PHONE NO | | | | | | | | |
| E-MAIL | | | | | | | | |
| AADHAR No | | | | | | | | |
| 6. Category | UR | <input type="checkbox"/> | SC | <input type="checkbox"/> | ST | <input type="checkbox"/> | OBC | <input type="checkbox"/> |
| | DEFENCE | <input type="checkbox"/> | SPORTS | <input type="checkbox"/> | NSS | <input type="checkbox"/> | NCC | KASH MIRI MIGRANTS <input type="checkbox"/> |

7. Academic Details

| Programmes | Board/University | Year of completion | Passed/Appeared | Marks Obtained | Max.Marks | Percentage |
|-------------------|------------------|--------------------|-----------------|----------------|-----------|------------|
| SSLC | | | | | | |
| Intermediate/10+2 | | | | | | |
| BA | | | | | | |
| MA | | | | | | |
| M.Phil | | | | | | |
| OTHERS | | | | | | |

Declaration by the candidate:

I have carefully read all the instructions for filling up the application form. I, solemnly declare that the forgoing information in the application form is complete, correct & true to the best of my knowledge and belief. I also certify that I am liable for disciplinary action by the University if any information given is found false/incorrect.

Place:

Date:

Head of the Department

Director of Admissions

Student's Signature

Dean of the Faculty

NOTICE

Sub : Reservation under Defence, Sports, NCC, NSS Quota for admission at IGNTU and RCM-Reg.

Dear Applicants,

It is learnt that some applicants did not claim reservation under Defence, Sports, NCC, NSS Kashmiri Migrants quota for admission to Honors, B.Pharma, D.Pharma and PG Programmes at IGNTU and RCM at the time of making online application.

The applicants who did not claim reservation as stated above for whatever reason (s) are hereby asked to fill in the Application Form (attached) along with the certificates to justify their claims and submit the same either by hand or by post (the scanned copies of the same scan to be sent to the following email ID) to the undersigned on or before 14 July 2016. No request in this regard shall be entertained after due date.

Controller of Examinations