



<b>CSIR-NET/BRNS / NBHM / GATE / other Test</b> (Write name of Exam) .....	<b>Valid upto</b>	<b>Roll No.</b>	<b>Score / Percentile</b>	<b>Discipline paper / subject</b>
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**12. Institute from which you have completed Qualifying Examination:**

<b>QUALIFICATION</b>	<b>NAME OF INSTITUTE</b>	<b>ADDRESS OF INSTITUTE WITH TELEPHONE NUMBER</b>

**13. Professional Work Experience (attach separate sheet if required):**

<b>S.No.</b>	<b>Post held</b>	<b>Duration</b>	<b>Work Description</b>

**14. Details of Bank Draft for Rs.2100/- non-refundable (in favour of Shobhit University, Meerut or Shobhit University, Gangoh)**

- (a) Name of the Bank
- (b) Draft No.
- (c) Dated
- (d) Amount

**15. Preferred Venue for appearing in Entrance Test**

**Shobhit University, Meerut**

NH-58, Modipuram,

Meerut - 250 110

Phone: +91-121- 2575092

**16. Declaration:** I hereby declare that all the information given by me in this application is true and correct to the best of my knowledge and belief. I also note that if any of the above statements are found to be incorrect or false or any information or particulars have been suppressed or omitted there from, I am liable to be disqualified. If selected, my admission will be liable to be cancelled without notice or compensation in lieu of notice. I have read and understood the contents of the Admission Notification for Ph.D. Programmes January 2017.

I hereby permit / do not permit (delete one) the Institute to use, display or transfer any of the details furnished by me in this form for any other purpose, except for complying with the admission formalities.

Date of Application\_\_\_\_\_

**(Signature of the Candidate)**

