



DEV SANSKRITI VISHWAVIDYALAY

Sankara, Kumhari Durg, C.G. 490042

Website : www.dsvvsankara.com, E-mail : registrar.dsvvs@gmail.com

APPLICATION FOR DOCTROAL PROGRAME

Personal Details (Write in Capital Only)

Discipline: _____

Subject: _____

Candidate name: _____

Father's Name: _____

Mother's Name: _____

Address: _____

_____ PIN _____

Mobile No: _____ Email: _____

Date of Birth: ____/____/____ Nationality: _____ Category: _____

Whether Net/Set/Gate/ Any Other Examination Qualified? Yes/No Year: _____ Score: _____

Paste
Photograph
Here

Name of the Examination	Examination Passed	Name of Institute/University	Year	Marks Obtain	Percentage
UG					
PG					
M.Phil					
Others					

Application Fee Details:

DD/NEFT No.: _____ Date _____

Amount _____ Bank Name _____

Declaration:

1. The information given above is true & correct to the best of my knowledge & belief.
2. I commit to abide by the Rules & Regulations of the University.

Place _____

Date _____

Signature of Applicant