

INDIRA KALA SANGIT VISHWAVIDYALAYA

KHAIRAGARH (Chhattisgarh) 491881

D.Lit./Ph.D. REGISTRATION FORM

Passport size
photo duly
self attested

Mode of Remittance - _____ (Attach Receipt)

Dated ____/____/____ Number _____

Faculty and Department applied for _____

Details of qualification & other -

1 Name in full (in block letter)

(a) In English _____

(b) In Hindi _____

2 Date of Birth ____/____/____ (In words) _____

3 Marital Status _____ 4 Gender _____

5 Father's Name _____ 6 Mother's Name _____

7 Husband's Name _____

8 Permanent residential address _____

9 Present postal address for correspondence _____

S.T.D.Code	Phone	Mobile No-1	Mobile No-2
Email			

10 Present occupation (if any) _____

Post held, name and Address of the employer) _____

(If employed, permission of the employer to be enclosed.)

11 (a) Caste _____

(b) Category _____

(c) Religion _____

(d) Nationality _____

(e) Minority _____

12 Details of Examination passed -

Name of the Examination	Subject	Division / Grade	Marks Obtained	Percentage of Marks	Year	Name of Board / Institution / University	Upload certificate
HSC							
HSSC							
U. G.							
P. G.							
M. Phil.							
Diploma							
NET/ SLET etc							
Any other							

(Self attested true copies of mark-sheets of the above examination must be enclosed).

13 (a) Subject of P.G. Examination. _____

(b) Specialization (If any) _____

14 Title of M.Phil dissertation . _____

15 Proposed area /topic of Research. _____

16. Attach Synopsis

17. Attach Migration certificate

18. Attach Publication (if any)

- **Attach separate sheets if required.**

Note: Please ensure that the entries in the application form are filled in properly and all necessary documents are serially numbered and enclosed with it. Incomplete applications shall be rejected.

DECLARATION OF THE CANDIDATE

I _____ do hereby declare that the information furnished by me is true to the best of my knowledge and belief.

Place _____

Date _____

(Name of the Candidate with Signature)