

IASE DEEMED UNIVERSITY

GANDHI VIDYA MANDIR, SARDARSHAHR DISTT. CHURU [RAJASTHAN]

Ph. 01564-22-0025/3642, Fax. 01564-223682 Email. oncampus@iaseuniversity.org.in Website – www.iaseuniversity.org.in

APPLICATION FORM

Entrance Test	for							• • • •											• • • •					• • •		<u></u>
Ph.D. (Education/ Bio	techn	olog	y/Zo	olog	y/Bo	otan	y/Ge	ogra	ıph	y/Va	ılue	Edu	ıcati	ion/	Maı	age	men	t/Hi	istor	y) <i>(</i>)R N	1.Ph	il. (Edu	ıcati	ion)
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(ii) Mother's Name	S	M	T																					$\overline{}$		
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7.Address for Commun (in capital letters) (Please do not repeat here)																										
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8.Mobile No.				_ 9.]	Land	lline !	No.								_ 10). Eı	nail								_	
11. Permanent Address (capital letters)																										
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12. EDUCATIONAL QUALIFICATION (Attach attested photo copies)

Examination Passed	Name of the Board/University	Year of Passing	Subjects Offered	Div./Grade	Max. Marks	Marks Obt.	% of marks
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6. Examination Centre (Please mark tick (✓)							
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Note- Unsigned Application Forms will be rejected.