



GEETANJALI UNIVERSITY

N.H.8, Bypass, Near Eklingpura Chauraha, Udaipur (Rajasthan) - 313001

Phone : +91 (0294) 2500000-6 ; Fax No. : +91 (0294) 2500007 ; www.geetanjaliuniversity.com

[Established under Act No. 07 of 2012]

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7.				

Note :

- * Please enclosed attested copies of 10th,12th, UG Marksheets & Degree, PG mark sheets & Degree, Certificate of Internship, Registration Certificate, Teaching/Clinical Experience, Aadhar Card & NOC (For in job candidates).
- * Please enclose Demand Draft of Rs. 5000/- drawn in favour of **Geetanjali University** payable at Udaipur.
- * Candidate can submit the form in person or via courier to the **Dean PG Studies, Geetanjali University, Udaipur (Rajasthan) - 313001.**

DECLARATION BY THE APPLICANT

1. I hereby declare that the above information is true and complete to the best of my knowledge and belief. I am aware that if any information herein is found to be incorrect or incomplete my application form will be rejected/admission will be cancelled.
2. I am aware of rules and regulations of the objective type competitive examination, and if I am found using unfair means or committing any irregularity, I can be expelled from the examination or my result can be cancelled by the Geetanjali University.

D.D. No. **Amount (Rs.)** **Date of Issue**

Name of Bank & Branch

Signature of Applicant

Place : _____

Date : _____



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Annexure - 1*

Form to be retained at the Examination Centre

GEETANJALI UNIVERSITY
Udaipur, Rajasthan
All India Pre-Ph.D. Entrance Examination – 2022-23

(All entries except Roll No. to be filled in by the candidate)

Roll No.

Name of Candidate :

Father's Name :

Full Postal Address :

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**Paste Recent
Passport Size
Photograph (Do
not staple / pin the
Photo)**

Signature attested

Full Signature of Candidate
(To be taken in the Exam. Hall)

Examination Centre
Superintendent

Full Signature of Candidate (To
be signed while filling form)

GEETANJALI UNIVERSITY
Udaipur, Rajasthan
All India Pre-Ph.D. Entrance Examination – 2022-23

(All entries except Roll No. to be filled in by the candidate)

Roll No.

Please admit :

Son/Daughter of

At the

..... centre.

**Paste Recent
Passport Size
Photograph (Do
not staple / pin the
Photo)**

Date :

Controller of Examination

*** Annexure-1 to be filled by the candidate and send back with original application form.**