



Gautam Buddha University

EDUCATION ENLIGHTENED

Gautam Budh Nagar-201310 (U.P.)

GPTR-2011

Application Form

Form No.....

School Applied for.....

Specialization.....

Mode: ☐ Full Time ☐ Working Professional

1. Name of Candidate (in full) : _____
(Block Letters)

2. (a) Father's Name : _____
Occupation : _____

(b) Mother's Name : _____
Occupation : _____

3. Date of Birth :

Date	Month	Year

Photograph

4. Sex (Please Tick) :

M		F	
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5. Nationality : _____

6. Name of State of Domicile : _____

7. Category (Please Tick) :
(Enclose the Certificate)

SC		ST		OBC		GEN	
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8. Tick (if applicable) : ☐ Dependents of Freedom Fighters
☐ Dependents of Retired/Handicapped/War Deceased Personnel
☐ Physically Handicapped

9. Address for correspondence: _____

_____ Pin code _____

Contact No. _____

E- Mail _____

10. Details of Publications: _____
(Attached extra sheet
if required)

11. **Academic Qualification** (Attach self-attested copies)

S.N.	Examination Passed	Branch/Specialization	College/University	Year of Completion	% of Marks / CGPA
1.	10 th				
2.	12 th				
3.	Graduation				
4.	Post Graduation				
5.	Other Qualifications				

12. **Work Experience** (Attach self-attested copies)

S.N.	University/ Organization	Designation	From	To	Duration	Nature of Duties
1.						
2.						
3.						

12. Draft Details : (Demand draft should be in favor of "The Chairman Admissions, Gautam Buddha University" payable at Noida/Greater Noida)
Amount _____ Name of Issuing Bank _____
Payable at _____ Date _____

13. Achievements : _____

Declaration

The above furnished information is true to the best of my knowledge and I understand that in case of anything found misleading or wrong my candidature is liable to be rejected without any notice.

Date:

Signature of Candidate

Place:



Gautam Buddha University
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GPTR-2011

Admit Card

Roll No.....

School Applied for.....
 Specialization.....

Name of candidate (in full): _____
 (Block Letters)

Father's/Mother's Name : _____

Date of Birth_____Address for Correspondence_____

Examination Centre Name_____

Photograph

S. No.	Programme	Test to be taken	Date of Examination	Time of Examination
1.	Ph.D.	GPTR-2011	29 May 2011	9:00 AM to 11:00 AM

Signature of Candidate

Chairman (Admissions)

Note: Entry to Examination Hall will be permitted with this admit card only.
 Reporting Time: Half an hour before commencement of Test.



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GPTR-2011

Verification Card

Roll No.....

School Applied for.....

Specialization.....

Name of candidate (in full) : _____
 (Block Letters)

Father's/Mother's Name : _____

Date of Birth_____Address for Correspondence_____

Examination Centre Name_____

Photograph

S. No.	Programme	Test to be taken	Date of Examination	Time of Examination
1.	Ph.D.	GPTR-2011	29 May 2011	9:00 AM to 11:00 AM

To be signed at the time of Examination

Signature of Candidate

Signature of Invigilator

Signature of Centre Superintendent