



**For General Category**

# University of Hyderabad

## Entrance Examinations, 2007

### Basic Data Form

**Hall Ticket Number**  
(to be filled by the office)

Paste here  
one recent stamp  
size photograph  
with half the  
signature on the  
photograph and half  
on the Data Form

Particulars of Demand Draft towards the Registration/Entrance Examination Fees for downloaded / Xeroxed applications only:

DD No.	Date	Amount	Issuing Bank	Payable at
				<b>Hyderabad</b>

For Office Use:  
D.D. verified & detached by:

Signature

Date

**Name of the candidate** (same as in the SSC / Matriculation Certificate)

Date of Birth  
Day Month Year

Nationality

Sex

State of  
Domicile

Category  
(SC/ST/PH/BC)

Whether Visually  
Handicapped

Choice of Entrance  
Exam Centre








Course Code

Choices/Preferences: (Applicable only for the courses with code nos. 1, 2, 3, 17, 44)

1<sup>st</sup>

2<sup>nd</sup>

3<sup>rd</sup>

4<sup>th</sup>

Position regarding the  
result of the Qualifying  
Examination (EP/RA/NA):

If the result of the qualifying  
degree is already declared indicate

Division

Percentage of Marks



Distinction in Sports/ Cultural activities

(attach copies of the certificate/s in support of your claim)

State level

National level



Provide GATE particulars, if applying for admission to **M.Tech.**, in **CS/AI/IT**.

Tick (✓) the appropriate box. (enclose a copy of GATE score card)

GATE in (CS)

GATE in (Non-CS)

GATE Score:

JRF qualified

(for **M.Phil/Ph.D.** only)

Yes

No

**Applicable for Integrated Courses only**

State whether you have passed the exams conducted by: KVPY / OLYMPIAD: **Yes / No** (if yes, enclose a copy)

Do you belong to any of the backward districts notified by the Govt. of India **Yes / No**, if yes, proof to be enclosed and indicate  
Place of Birth: District: State:

Medium of instruction in Intermediate or equivalent course: **English / other than English**

Whether you are interested to enroll in NSS?

Yes / No

Do you belong to any minority community (statistical purpose only) :

Yes / No

If Yes, state Community:

Religion:

Permanent Address

Pin

Email:

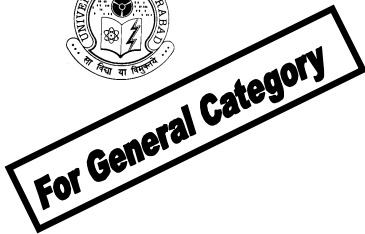
Present Mailing Address

Pin

Email:

**Dated:**

**Signature of the candidate**



**UNIVERSITY OF HYDERABAD**  
**APPLICATION FOR**  
**ENTRANCE EXAMINATIONS - 2007**

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**Note:**

- |  |
|--|
|  |
|--|

\_\_\_\_\_

Course Code 







 Course 



 Subject 



 Choice of Exam Centre

[illegible]

Mother's Name : \_\_\_\_\_ Occupation : \_\_\_\_\_ Annual Income Rs. \_\_\_\_\_

<b>3.a) Date of Birth</b>	<b>b) Nationality</b>	<b>c) Sex</b>	<b>d) Marital Status</b>	<b>e) State of Domicile</b>	<b>f) Whether SC/ST/PH/BC</b>	<b>Whether Visually Handicapped</b>
Day    Month    Year						Yes   No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

5 (a) If applying for admission to **Integrated Courses (IMA/IMSc) / M.Tech. (CS/AI/IT) / M.F.A. (Painting / Print Making / Sculpture)** indicate your order of preference:

1 <sup>st</sup>		2 <sup>nd</sup>		3 <sup>rd</sup>		4 <sup>th</sup>	
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GATE in (CS)  GATE in (Non-CS)  GATE Score:

6. Present position regarding the result of the qualifying degree examination (EP/RA/NA): 

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 Division: 

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8. Do you belong to any minority community (statistical purpose only): Yes / No

Religion:

### 9. Particulars of past academic record from Matriculation onwards

Examination Passed	Name of the University/ Board	Subjects studied and passed	Month & Year of passing	R E S U L T			
				Max Marks	Marks obtained	Percentage	Class/ Division
* Matric/S.S.C.							
*Inter/H.S.C.(10+2)							
<b>Bachelor's Degree</b> * B.A./B.Sc./ B.Com. etc.  Subjects taken _____ _____ _____ _____		Part-I (Compulsory Subjects) (Languages) 1. 2.					
		Part-II(Optional/Core Subjects) (Group) 1. 2. 3.					
<b>Master's Degree</b> * M.A./ M.Sc./ M.Com. etc.  ..... (Subject)		1st Year marks					
		2nd Year marks					
		Aggregate					
* M.Phil./M.Tech.							
Any other Degree/Diploma * B.E./B.Tech./MCA,etc.							

\* Delete whichever is not applicable

### 10. If applying for admission to PG. courses (M.A.,M.Sc.,MCA., Adv. PG Dip., etc), furnish the following information.

No column is to be left blank.

Name of the Bachelor's Degree Examination ..... Name of the University ..... Period of Study From ..... to ...

Year of study		Subjects studied and passed	Month & Year of passing	R E S U L T		
				Max. Marks	Marks Obtained	Percentage
1st year courses	Compulsory subjects (Languages)	1. English 2. .... 3. ....	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
	Optional/core subjects (Group)	1. .... 2. .... 3. ....	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
2nd year courses	Compulsory subjects (Languages)	1.English 2. .... 3. ....	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
	Optional/core subjects (Group)	1. .... 2. .... 3. ....	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....
3rd year courses	Optional/core subjects ( Group)	1. .... 2. .... 3. ....	..... ..... .....	..... ..... .....	..... ..... .....	..... ..... .....

11. State if there was any gap in your studies. Give period, reasons etc:

12. Distinctions achieved in Sports & Cultural activities: (Provide this information only if applying for admission to PG courses)  
(Attach certificate/s in support of your claim). Tick ( ✓ ) in the relevant box

Field of activity: \_\_\_\_\_

☐

State  
level

☐

National  
level

13. If applying for M.Phil., M.Tech., or Ph.D. programmes

a) Mention areas of research interests in order of preference:

1)..... 2)..... 3).....

b) Give details of publications & research work carried out, if any

.....  
.....  
.....

c) Have you qualified in the UGC/CSIR National level test for JRF ?

Write, Yes or No

☐

(also, NBHM fellowship test in case of admission to Ph.D. Mathematics and ICMR/ICAR/DBT fellowship tests in case of Ph.D admission in the School of Life Sciences)

If yes, give the following details:

Name of the Exam:.....

Roll No.....

Subject:.....

Year & Date of examination .....

If holding the Fellowship, the date from which it is held : Date \_\_\_\_ Month : \_\_\_\_ Year : \_\_\_\_

d) Do you possess M.Phil/M.Tech degree ?

Write, Yes or No

☐

(for those applying for Ph.D. admission)

e) Are you seeking exemption from appearing in the written test

Write, Yes or No

☐

on the basis of your having qualified in UGC/CSIR JRF test/NBHM/ICMR/ICAR/DBT Fellowship test.

Did you avail the exemption on an earlier occasion?

Write Yes or No

☐

f) Write whether you are applying for Regular, Part-time or External Registration to Ph.D. ....

**Note:** Candidates with UGC-NET for lectureship alone and possessing M.Phil./M. Tech. Degree are not exempted from the written test

14. Present or previous employment, if any

Organisation & Address	Position Held	From - To	Nature of Duties

15. Do you require Hostel Accommodation ?

Write, Yes or No

☐

16. Were you ever subjected to a disciplinary action by any authority ? Write, Yes or No

☐

If yes, give details .....

17. Whether you are interested to enroll in National Service Scheme (NSS) ?

Yes	No
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18. Any other relevant information:

**19. DECLARATION BY THE APPLICANT:**

I hereby declare that all the information furnished by me in this application and in the documents I have submitted in support of my application are true, complete and correct. In case any information in this application is found to be false or incorrect at any time, this shall entail automatic cancellation of my admission, if granted, besides rendering me liable to such action as the University may deem fit.

In the event of any medical or other emergency, my parent/s or Guardian may be contacted at the address given below

Place:

Date:

Signature of the Candidate

**20. DECLARATION BY THE FATHER/MOTHER/GUARDIAN:**

My daughter/son/ward Mr./Ms..... is applying for admission to the University. In case of her/his admission to the University, I shall be responsible for payment of all her/his fees and other charges including any emergency, medical or other expenses incurred by the University. In case any information in this application is found to be false or incorrect at any time, this shall entail automatic cancellation of my daughter's/son's /ward's admission, if granted, besides rendering her/him liable to such action as the University may deem fit. I will also be responsible for her/his good conduct and behaviour during the period of her/his stay in the University. Further, I may be contacted in the event of any emergency as determined by the University.

**Signature of the parent / Guardian**

Place

Date

Full Name .....

Relationship with the applicant .....

Telephone Numbers (if any): (Office) :

(Residence) :

**Note: Signature of the parent in this application form will be considered as basis for all verification purposes in the University.**

<p><b>PERMANENT ADDRESS</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Telephone No.....</p> <p>Email : .....</p>	<p><b>PRESENT MAILING ADDRESS</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>PIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Telephone No.....</p> <p>Email : .....</p>
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