



GANGADHAR MEHER UNIVERSITY
AMRUTA VIHAR, SAMBALPUR-768004, ODISHA

Application form for admission into Ph.D. Program July 2025

(To be filled in by the Applicant)

Subject : _____ Index-cum Roll No: _____ (To be assigned by office)	Self-attested passport size photograph to be pasted here
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1. Name of the Applicant : _____
(In block letters)
2. Date of Birth : _____
3. Name of the Father : _____
4. Name of the Mother : _____
5. Permanent Address : _____

6. Present Address : _____
: _____

7. Email : _____
8. Mobile No. : _____
9. Alt. Mobile No. : _____
10. Category (SC/ST/General/SEBC/PwD) : _____
(Photocopy of required certificate must be attached)
11. Sex : _____
12. Marital Status : _____

13. Religion and Nationality:_____

14. Educational Qualification (10th /Equiv. onwards):

Name of the Exam.	Board/University	Year of passing	Class/Division	% of Marks	Optional/Hons / Spl. Paper
10 th / Equiv.					
+2					
+3					
P.G.					
M.Phil.					

(Self-attested photocopies of all certificates and mark-sheets are to be attached)

15. Whether having Distinction in +3 (YES/NO): _____

16. Subject of specialization in M.A/M.Sc/M.Com:_____

17. Whether M.Phil degree holder with a course on Research Methodology (Yes/No): _____

If yes Mark/Grade obtained in Research Methodology: _____

(If yes, submit a photocopy of such certificate)

18. Whether employed (**Yes/No**) :_____, If Yes,

Name of the Institution: _____

Designation: _____, Teaching Experience: _____Yrs

(If employed, No Objection Certificate of employer is to be submitted)

19. Have you qualified UGC-CSIR-NET/GATE/SLET/DBT/ICMR/ICAR/INSPIRE Fellowship of DST/NFST/NFSC/NFOBC (**with a valid score**) (**Yes/No**):_____, (If yes, attach the certificate)

20. Details of fees paid:

(a) 1500 (Rupees one thousand five hundred) only in favour Of “The Comptroller of Finance, G.M. University” payable at Sambalpur

(b) DD No. :_____ Date: _____

I, Sri/Ms. _____do hereby declare that the particulars given by me in this application are true to the best of my knowledge.

Date:_____

Signature of the Applicant