



दक्षिण भारत हिन्दी प्रचार सभा, मद्रास  
DAKSHINA BHARAT HINDI PRACHAR SABHA, MADRAS

उच्च शिक्षा और शोध संस्थान (विश्वविद्यालय प्रभाग)  
POST-GRADUATE AND RESEARCH INSTITUTE (UNIVERSITY WING)

दूरस्थ शिक्षा निदेशालय  
DISTANCE EDUCATION DIRECTORATE

Form No

ADMISSION FORM

Send dully filled application form within the time-frame to the CRC (DBHPS) Office along with Xerox of Original Certificate, Mark sheet, degree duly attested by a Gazetted Officer in two sets

Enrollment No: [office use only]

1. Course Applied For .....

2. Semester/Year : ..... 3. Admission Session.....

4. ACGC Code

5. Name of Applicant: .....

6. Father's / Husband's Name : .....

7. Mother's Name : .....

8. Date of Birth :    9. Nationality : .....

10. Religion : ..... 11. Caste : ..... 12. Category : .....

13. Educational Qualifications:

Sl.	Examination Passed	Name of the Board / University	Year of Passing	Marks Obtained	Total Percentage
1.	10th				
2.	12th				
3.	Graduation				
4.	Post Graduation				
5.	M. Phil				

14. Address for Postal Communication : Village / Mohalla : .....

Street : ..... P.O : .....

District : ..... State : ..... Pin :

Phone

Fax :

Mobile :

Mobile :

E-Mail:

15. Enclosed (Please Tick the attached enclosures)

10th

12th

Graduation

Post Graduation

M.Phil

[The above statement must be attested by the same Gazetted Officer, who attests the photograph]

Form No.:

Acknowledgment of Admission Form

This is to inform that Mr. / Mrs./Miss ..... Son / Daughter  
W/o of..... Application form is being provisionally selected for the course of  
.....sem /year.....session.....issued enrollment  
No.[Provisional].....

Date .....

Signature of CRC Officer