

xv. Permanent Address:

District																				
State																				
														Pin Code						

xiii. Contact No. of Applicant

STD Code

Phone No.

Mobile No. of Applicant

(for communication by the university)

Land Line					
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xiv. Contact No. of Parent /Guardian

STD Code

Phone No.

Mobile No. of Parent /Guardian

Land Line					
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xv. Email ID of the Applicant: (for communication by the university)

xvi. Aadhar No.:

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B. Application Fee Details: (Rs. 1000)

a) Cash **Receipt No.** (If paid in cash)

b) DD **DD No.**..... **Date** **Drawee Bank**

The Demand Draft should be made in favor of “**IIHMR UNIVERSITY**”, payable at “**Jaipur**”. The name and mobile number of the student should be written at the back of the Demand Draft.

C. Academic Performance:

In case of grade, authentic conversion formula must be attached.

Post-Graduation Stream:	
Post-Graduation Aggregate Marks obtained:	
Post-Graduation Maximum Marks:	
Post-Graduation Aggregate Percentage obtained:	

Please give information year wise (graduation and post-graduation Degree) about your academic qualifications (start with the class X down to Last degree)

S. No.	Name of Examination	Name of Board/University*	Name of College/ Institute	Year of Passing	Maximum Marks	Marks Obtained	% of Marks (aggregate)	Division

*** The degree/course should be recognized by a university in accordance with the Association of Indian Universities/ MCI/AICTE/UGC.**

D. Entrance Exam:

Aspirants who do not have M.Phil. Degree or any qualified eligibility test UGC-NET/JRF/SLET/GATE or CSIR, should appear in IRAT of the IIHMR University.

S. No.	Exam	Please tick in the box (v)	(For Office Use only)	
			Max. Marks	Obtained Marks
1.	IRAT of IIHMR U	<input type="checkbox"/>		
2.	Do you have M.Phil. Degree or any qualified eligibility test UGC-NET/JRF/SLET/GATE or CSIR.	Yes <input type="checkbox"/> No <input type="checkbox"/> Please specify_____		

Declaration by the Applicant

I hereby certify that the above information provided by me is correct and, I understand that if the information is found to be incorrect or false, then I will be automatically debarred from the selection/admission process without any correspondence in this regard. I also understand that the application/registration/short listing does not guarantee admission in the University. I accept the process of admission undertaken by the University and I will abide by the decision taken by the University authorities. I have checked the information carefully. I will, on admission, adhere to the rules and discipline of the University. I hold myself responsible for the dues and payment of fees. I confirm that there is no Criminal case filed against me and will provide the necessary information as and when required by the University.

Name

Signature

Date

**List of the self-attested documents to be attached with the application for admission: -
(To be attached in following sequence):**

S. No.	List of the documents	Tick in the box (v)
1.	Copy of Class 10-mark sheet and certificate.	
2.	Copy of 10+2-mark sheet and certificate.	
3.	Copy of mark sheets of all the semesters/years Bachelor's Degree.	
4.	Copy of mark sheets of all the semesters/years Master's Degree.	
5.	Copy of Internship Certificate. (if applicable)	
6.	Copy of Grade conversion formula. (if applicable)	
7.	Copy of or M.Phil. Degree or Certificate(s) of any eligibility test UGC NET/JRF/SLET/GATE or CSIR. (if applicable)	
8.	Character certificate by the college/ a gazetted officer.	
9.	Copy of Aadhar card.	
10.	Copy of Caste certificate issued by the respective Tehsildar/SDM/DM, in case the applicant is from any of the reserved categories.	
11.	2 Passport size photographs with name written at the back.	
12.	Copy of Physically Handicapped (PH) certificate. (if applicable)	
13.	Copy of Minority certificate. (if applicable)	
14.	Affidavits (ANNEXURE I & II) on Rs. 10/20/50/100 non-judicial stamp paper duly signed by the student and the parent/guardian (as per formats) need to be upload or you can submit on the day of joining the course.	

**ANNEXURE I
AFFIDAVIT BY THE STUDENT**

I, _____ (full name of student with admission/registration/enrolment number)

S/o - D/o Mr./Mrs./Ms _____

having been admitted to _____ (name of the institution), have received a copy of the UGC regulations on Curbing the menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

2. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulation and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that
 - a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
 - b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
6. I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

**Signature of Deponent
Name:**

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on this the _____ (day) of _____ (month) _____ (year)

Signature of deponent

Solemnly affirmed and signed in my presence on this the _____ (day) of _____ (month), _____ (year) after reading the contents of this affidavit.

OATH COMMISSIONER

**ANNEXURE II
AFFIDAVIT BY PARENT/GUARDIAN**

I, _____ Mr./Mrs./Ms. (full name of parent/guardian) father /mother/
guardian of _____

(full name of student with admission /registration/enrolment number),

having been admitted to _____ (name of the Institution), have received a copy of the UGC regulations on Curbing the menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

2. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
4. I hereby solemnly aver and undertake that
 - a) My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
 - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
5. I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
6. I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission my ward is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of Deponent

Name: _____

Address: _____

Telephone/Mobile No: _____

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on this the _____ (day) of _____ (month) and _____ (year).

Signature of Deponent

Solemnly affirmed and signed in my presence on this the (day) of month, (year) after reading the contents of this affidavit.

OATH COMMISSIONER