# **UTKAL UNIVERSITY**

Form Sl. No.



### POST-GRADUATE TEACHING DEPARTMENTS

VANI VIHAR, BHUBANESWAR – 751 004

# APPLICATION FORM FOR ADMISSION M.A. IN HINDI

Paste Passport Size
Photograph

			ROLL/ INDEX NO	).					
	(FOR OFFICE USE ONLY)								
	Career Marks		Verifying Officer						
	Entrance Test Mark		Admission In-charge						
	Total Marks								
	Position in the Selection List		Head of the Department						
	Recommendation of the Head		•						
	of the Department								
	Roll No.		Date of Admission						
2.	The Programme for which the admission is sought.  Programme Name M.A. in Hindi  (a) Name of the applicant (in CAPITAL LETTERS, with surname first) (b) Gender (Male/Female/Others)  (a) Date of Birth (as recorded in the Matriculation certificate)								
	Date Month Ye	ear (b)	Nationality						
		(c)	Religion						
		(d)	Mother Tongue  Marital Status						
		(e)	Marital Status						
4.	Utkal University Registration I	No	of year _		(if any)				
5.	(a) Whether you were admitted	l/ have passed/ a	ppeared any other Pos	st-Graduate	Courses or have				
	completed any Post-Graduate	Course, to qualify	to sit for annual Exa	minations.	YES NO				
	(b) Are you admitted to any Course? YES NO  If yes, mention the name of the College, University and Course								
	UNIVERSITY								
	COLLEGE								
	COURSE								

Name:-								
Add Line 1								
Add Line 2								
PO:-		Dist.:-		State:-		P	IN:-	
Mobile:-				WhatsA <sub>I</sub>	op No.:-			
Email:-								
Details of Acad	lemic C	arrer:						
Examination	Year	Board/	Division/	Subjects	Details of Marks			Tota
Passed		University	Distinction	Offered	Mark Secure		all % rks	Care Mar (for Office use
H.S.C. or Equivalent +2 Arts/ Science/								
Commerce				***	TT			
+3 Arts/ Science/				Hons. Sub.	Hon.			
Commerce/ B.E./ B.Tech./					Aggrega (exclud ancillar	ing ry		
Other (Mention)					subject	:s)		
	1			I		,	TOTAL	
Please mentior	n clearly	if you have	secured Dis	tinction in +3	B Degree l	Examinat	ion.	
N.B.: Attach	-		es of marks	heets & cer	tificates	of all the	e above-n	nentior
Do you have a If yes, give deta	ny crim	s <b>passed</b> inal anteced	lents, includi	ing police cas	se if any?	YES	NO	
Details of Fees		r entrance e	examination:					
Crossed Demand Draft No.			Date			Amount		
(a) Whether er			NO					
(b) If yes, ment	tion the	name of the	e Employer, I	nstitution an	id Designa	ation		
En	nployer		Ins	stitution		Des	signation	

6. Address for Correspondence: (CAPITAL LETTERS)

Name of		Name of			
Father:-		Mother:-			
Occupation		Occupation			
of Father:-		of Mother:-			
Address:-		Address:-			
Phone:-		Phone:-			
WhatsApp:-		WhatsApp:-			
Email:-		Email:-			
12. Local Guardian's Na	ame, Relationship, Occ	cupation and Address:			
Name:- Relationship:- Occupation:-					
Address:-					
	_		Phone:-		
13. Permanent Address	(IN CAPITAL LETTERS	S)			
Name:-					
Add Line 1					
Add Line 2					
PO:-	Dist.:-	State:-	PIN:-		
Mobile:-	Mobile:-		WhatsApp No.:-		
Email:-					
		the Information Bulletin care	fully before filling this form.		
	application shall be rejuted the application by region		ant due sufficiently cheed as		
		stered post with acknowledgmoof the P. G. DEPARTMENT of			
		before the last date of submis			
	rent in the concerned D		cion of application of acposit		

- in the Box kept in the concerned Department Office.
- 3. Except the Index Card, no other acknowledgment will ordinarily be sent or given.
- 4. Attach account payee DEMAND DRAFT of RS. 600/- in favour of A.O., P. G. TEACHING **DEPARTMENTS, UTKAL UNIVERSITY, Payable at any Nationalised Bank in Bhubaneswar** for entrance test.
- 5. All fees are non-refundable.

11. Parrent's Name, Occupation and Address:

6. Any misinformation found on verification of the original documents, shall lead to cancellation of selection/ admission, if made, and will be considered as a cognisable offence.

#### **DECLARATION**

I declare that the particulars furnished in the form are true to the best of my knowledge and I will not take admission in more than one course concurrently nor shall I take up any job (not applicable for part time course) during the course. I agree to abide by the rules of P. G. Departments of the University, if admitted.

Date:

## **ADMIT / INDEX CARD**

Time: 11:00 AM to 11:45 AM	
Date of Entrance Examination: 13 / 01/ 2025	
You are required to quote this number always in all your future correspondence regarding admission.	Photograph
You have been assigned the INDEX/Roll No.	Paste Passport Size
into the <b>M.A. in Hindi</b> .	
The undersigned acknowledges the receipt of your application for admission	

Venue: P. G. Department of History, Utkal University, Vani Vihar, Bhubaneswar, Odisha.

**N.B.:** The candidate has to report at the venue for appearing the entrance examination at least half an hour before the commencement of Exam.

Director/Principal/ Coordinator M.A. in Hindi