

# JAYOTI VIDYAPEETH WOMEN'S UNIVERSITY, JAIPUR

(Established under Jayoti Vidyapeeth Women's University, Jaipur, Act, 2008 (Act No. 17 of 2008) by the Govt. of Rajasthan & Recognized by UGC under Sec. 2f of UGC Act 1956.)

**Campus:-** Vedant Gyan Valley, Village Jharna, Mahala-Jobner Link Road, Jaipur - Ajmer  
Express Way, NH- 8, Jaipur, Rajasthan (India). Pin - 303007.

**Website:** www.jvwomensuniv.com

**Email:** info@jvwomensuniv.com

Application Form No.....

## APPLICATION FOR JOINT NATIONAL ENTRANCE EXAMINATION OF "RESEARCH PROGRAMS"

Roll No. ....  
(For Office Use Only)

### Examination Fee:

Draft Amount: Rs.....Draft No.:.....Date of Draft:.....  
Name of Bank:.....

### Note:

- (i) Demand Draft should be drawn in favour of 'Jayoti Vidyapeeth Women's University, Jaipur' payable at Jaipur.
- (ii) Write your name, course name and address on the back side of the Demand Draft.

### Instructions for filling the Application form:

- (i) Use Blue ball point pen only.
- (ii) Application form should be filled in capital letters.
- (iii) Tick (✓) at the relevant box.
- (iv) Write NA when not applicable.

### A) INFORMATION ABOUT COURSE:

**Course Applied For:** Ph.D. PROGRAMME (REGULAR) [ ] (EXTERNAL) [ ]

### B) PERSONAL INFORMATION:

#### Candidate's Name:

First ..... Middle ..... Last.....

**Gender:** Male [ ] Female [ ]

**Category:** GEN [ ] SC [ ] ST [ ] OBC [ ]

Person with Disability (PWD): Yes / NO

**(If yes, a certificate from appropriate authority to that effect is to be enclosed).**

**Date of Birth:** Date: ....., Month: ..... Year: .....

**Father's/Husband's Name:**

First ..... Middle ..... Last.....

**Mother's Name:**

First ..... Middle ..... Last.....

The candidate is required to paste his / her  
recent passport size  
self attested Photograph

Affix recent Passport  
size Photograph  
signed by the  
candidate and duly  
attested by a Head of  
the Institution or  
class I Gazetted  
officer.  
(DO NOT USE STAPLER  
OR PIN)

**Nationality**.....

**C) PERMANENT ADDRESS:**

**Address:**.....  
.....  
.....

City: ..... Pin:  
.....

State: ..... Nearest Rly. Station:.....

**D) ADDRESS FOR COMMUNICATION:**

**Address:**.....  
.....  
.....

City: ..... Pin:  
.....

State: ..... Nearest Rly. Station:.....

**Contact details:**

(Landline with STD code).....

(Mobile).....

**Email ID**

.....

**E) EDUCATIONAL DETAILS:**

**Highest Education Level:** Post Graduation [ ] Graduation [ ]

Name of qualifying examination as per minimum eligibility:.....

Whether Passed /Appearing.

If appearing then probable month with year of examination result: .....

**Educational qualifications**

<b>Standard</b>	<b>University / Board</b>	<b>Year of Passing</b>	<b>Marks Obtained</b>	<b>Percentage of marks %</b>
<b>X (High School)</b>				
<b>XII (Higher Secondary)</b>				
<b>Graduation</b>				
<b>Post Graduation</b>				
<b>Others</b>				

**Academic/ Research experience (if any):**

<b>S. No.</b>	<b>Position</b>	<b>Organization</b>	<b>Period</b>	<b>Assignments</b>

### Examination Detail

**Subject Code\***

(\* Please fill in the Code as given below matching your subject in the qualifying examination.)

Code No. ....

Subject Code No.	Subject
01	Computer Science & Information Tech.
02	Electronics & Telecommunication
03	Life Sciences & Biotechnology
04	Microbiology
05	Food Science & Technology
06	Physics
07	Chemistry
08	Mathematical Sciences
09	Pharmacy
10	Management & Commerce
11	Economics
12	English
13	Sociology
14	Political Science
15	Public Administration
16	Home Science
17	History
18	Journalism & Mass Comm
19	Hindi
20	Law & Governance

**Choice of Examination Centre:**

Examination Centre.....

**Declaration:**

I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or any ineligibility being detected before or after the Test, my candidature is liable to be cancelled and legal action may be taken against me. I fulfill all conditions of eligibility regarding age limit, educational qualifications etc. prescribed for the Test. I have gone through the instructions attached to this application form and shall abide by the same.

I have enclosed the demand draft of requisite amount. I have noted that if my application is found incomplete, the same is liable to be rejected summarily and no correspondence will be made in this regard.

Place:

Date:

Signature of the Candidate