



TAMIL UNIVERSITY
THANJAVUR – 613 010

COLOUR
PHOTO

APPLICATION FORM FOR MASTER OF PHILOSOPHY (M.Phil.) FULL-TIME

The last date of the receipt and submission of filled-in applications :

1. NAME (IN CAPITAL LETTERS) :

2. NAME OF FATHER/GUARDIAN

| | | |
|---|----------------------|----------------------|
| 3. OCCUPATION OF FATHER/GUARDIAN & ANNUAL INCOME | OCCUPATION | INCOME |
| | <input type="text"/> | <input type="text"/> |

4. ADDRESS FOR COMMUNICATION WITH CELL PHONE NUMBER :

5. PERMANENT ADDRESS :

| | | | |
|---------------------------|----------------------|----------------------|----------------------|
| 6. DATE OF BIRTH : | DAY | MONTH | YEAR |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | | | |
|-----------------|----------------------|----------------------|----------------------|
| 7. SEX : | MALE | FEMALE | OTHER GENDER |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | | |
|-------------------------|----------------------|----------------------|
| 8. NATIONALITY : | INDIAN | OTHERS |
| | <input type="text"/> | <input type="text"/> |

| | | | | | | |
|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 9. COMMUNITY : | OC | BC | OBC | DC | SC | ST |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

10. CASTE :

| | | |
|--------------------------|-----------------------|----------------------|
| 11. AADHAR NUMBER | 12. PAN NUMBER | 13. E-MAIL ID |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

14. PHYSICALLY HANDICAPPED :

| | |
|------------|-----------|
| YES | NO |
|------------|-----------|

(IF YES ATTACH CERTIFICATE)

15. EDUCATIONAL QUALIFICATIONS : _____
(UNDER GRADUATE DEGREE)

| REG.NUMBER | DATE & YEAR OF PASSING | SUBJECT | MARKS OBTAINED | | NAME OF COLLEGE/ UNIVERSITY | % OF MARKS/ REGULAR/ DISTANCE MODE/NO. OF ATTEMPT |
|------------|------------------------|---------|----------------|---------|-----------------------------|---|
| | | | TOTAL | SECURED | | |
| | | | | | | |

(POST GRADUATE DEGREE)

| REG.NUMBER | DATE & YEAR OF PASSING | SUBJECT | MARKS OBTAINED | | NAME OF COLLEGE/ UNIVERSITY | % OF MARKS/ REGULAR/ DISTANCE MODE/NO. OF ATTEMPT |
|------------|------------------------|---------|----------------|---------|-----------------------------|---|
| | | | TOTAL | SECURED | | |
| | | | | | | |

16. COURSE APPLIED FOR : _____

17. DEPARTMENT TO DO RESEARCH : _____

18. DETAILS OF ENTRANCE EXAM FEE PAID :

C. NAME OF BANK : _____
CHALLAN NUMBER : _____ **DATE:** _____

D. DEMAND DRAFT NUMBER : _____ **DATE:** _____

DATE:

APPLICANTS SIGNATURE

PLACE:

ENCLOSURES TO BE ATTACHED WITH THE FILLED IN APPLICATION

- Self Attested Photocopies of 10th, 12th Mark sheets
- Self Attested Photocopies of consolidated Mark list, Community, Transfer certificates and others
- A recent Passport Size Photo pasted on the first page of the application form
- Aadhar Card Xerox