



Jadavpur University

যাদবপুর বিশ্ববিদ্যালয়

Application for Admission to the Post Graduate Diploma in Yoga Therapy Course

Receiving Assistant

Date.....

OBC-A	OBC-B	SC	ST
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Please tick mark (3) the item, if applicable, and enclose Certificate from Competent Authority.

To Affix Recent Passport size Photograph duly signed by the applicant.

To
The Registrar
Jadavpur University
Kolkata 700 032

Sir,

I wish to apply for admission to the one year Post Graduate Diploma in Yoga Course.

I declare that all statements made in the application are true to the best of my knowledge. Any statement made in the application form, if found incorrect on scrutiny, shall render the application liable to rejection and admission, if granted on the basis of that statement, shall stand cancelled.

I also pledge that I will ever strive to be true to the noble ideals of the National Council of Education, Bengal, from which Jadavpur University has originated.

If admitted, I undertake to abide by all the existing Rules and Regulations of the University as at the time of my admission or as may be altered from time to time.

Yours sincerely,

.....
Applicant's Signature in full

(TO BE FILLED IN CAPITAL LETTERS)

I. Name of the Applicant

.....
(as in School Leaving Certificate)

(Surname)

(First Name)

(Middle Name)

2. Address in full

(i) Permanent address

.....

..... Phone No. (if any).....

(ii) Present address (where communication is to be made).....

.....Phone No. (if any).....

3. Father's Name

4. Mother's Name

5. Name & address of the Guardian.....

.....Phone No. (if any).....

6. Relationship with the Guardian :.....

7. Occupation of father/mother/guardian

8. Applicant's annual family income

(Income Certificate is to be submitted along with the form)

9. Date of birth (as in School Leaving Certificate)
10. Mother tongue.....
11. Sex 12. Nationality
13. Place of birth (i) District..... (ii).State.....
14. Whether **SC/ST/OBC-A/OBC-B** (Please tick mark whichever is applicable)

15. a) Record of complete academic career upto the day of application (commencing with the Madhyamik or equivalent examination) :

Name of the School/College	Name of the Examination	Name of the Board/University	Subjects taken	Passed/ appeared in the year	% of marks obtained	Division/ Class obtained

b). Record of Sports Career : Whether participated in Inter-National/National / Inter-District/Inter-iversity/Inter-College /Inter-School/ 1st Division/ Block level matches/events, organised by the Competent Body /Association and recognised by the Government (evidence to be enclosed) :

1.
2.
3. 4.

16. Particulars of academic course being pursued at this time, the result of which has not yet been declared :

Name & Address of Institution	Name of the Course	Name of University	whether appeared/ due to appear	when expected to be completed

17. If now a student of Jadavpur University or a student earlier and not subsequently migrated to another University/Institution.

Registration No.....of(Academic Session)
 Course of Study..... Deptt.....

18. Particulars of Employment.

Name and address of the School/College Organisation where working/employed	Designation of the applicant	Date of Appointment	Date of leaving	Scale of Pay and salary per month

b) Total period of service after obtaining the B.P.Ed. or equivalent degree as a whole time salaried staff in recognised School/College/ University/Institution year.....month

Date.....

Applicant signature

MEDICAL CERTIFICATE

Certified that I have examined the applicant, Sri/ Sm.
on this date, the201..... and consider him/her physically fit for undergoing an intensive
course of training in Yoga.

Place

.....
Signature of the Medical Practitioner

Date.....

Name

Registration No.

Candidates should note the following instructions:

1. (a) Attested copies of Admit Card/Certificate (for age verification) and Mark sheets of all the examination passed are to be enclosed inside the form.
(b) Attested copies of the SC/ST/OBC-A/OBC-B Certificate, issued by the competent Authority are to be enclosed in case of applicants applying under the SC/ST/OBC-A/OBC-B or quota.
2. Application Form must be properly filled in. An incomplete or irregular Form will not be considered.
3. All original certificates and mark-sheets will have to be produced at the time of interview and also at the time of admission if selected.
4. The Admission Committee reserves the right of not selecting any candidate who is considered by it to be physically unfit or otherwise unsuitable.
5. The applicants are advised to enclose all relevant papers inside the form.

***Form are to be submitted at the Office of the Head. Department of Physical Education, Jadavpur University, Kolkata - 700032
between : 11-00 A.M. and 4-00 P.M. on Weekdays (Mondays to Fridays)**

For Office use only

Note, if any

Interviewed on

.....
Signature

Date

Opinion of the Head of the Department

.....
Signature

Date

Decision of the Admission Committee

.....
Signature of the Chairman Admission Committee
Vice-Chairman

Admit to the one year Post-Graduate Diploma in Yoga Course by/on

.....
Secretary, Faculty Council of Arts

Date.....

Cash Sections :

Amount Recieved Rs.....

Receipt No.....

Date

.....
Signature

Muster Roll Sections:

Roll Number.....

Department.....

Admitted on.....

.....
Signature

.....
Registrar

Price : Rs. 100.00