



Dr. B. R. Ambedkar University Delhi

**Necessary Performa/s for Admission
for Shortlisted Candidates**



Dr. B.R. Ambedkar University Delhi

ECONOMICALLY WEAKER SECTION CERTIFICATE PERFORMA

Government of
(Name & Address of the authority issuing the certificate)

INCOME & ASSETS CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No. _____

Date: _____

VALID FOR THE YEAR _____

This is to certify that Shri/Smt./Kumari _____ son/daughter/wife of _____ permanent resident of _____, Village/Street _____ Post Office _____ District _____ in the State/Union Territory _____ Pin Code _____ whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income* of his/her 'family'*** is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year _____. His/her family does not own or possess any of the following assets*** :

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

2. Shri/Smt./Kumari _____ belongs to the _____ caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List)

Signature with seal of Office _____
Name _____
Designation _____

Recent Passport size
attested photograph of
the applicant

*Note1: Income covered all sources i.e. salary, agriculture, business, profession, etc.

**Note 2: The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

***Note 3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.



Dr. B.R. Ambedkar University Delhi

MEDICAL CERTIFICATE** (FOR THE ACADEMIC SESSION 2022-23)

(TO BE SUBMITTED AT THE TIME OF ADMISSION/DOCUMENT VERIFICATION)

Photograph
duly attested
by the officer
who has
certified this
certificate

I certify that I have carefully examined Shri/Km/Smt.* _____
son/ daughter/wife of Shri/Smt.* _____ whose
signature is given below. Based on the examination, I certify that he/she is in good mental and physical
health and is free from any physical defects which may interfere with his/her studies including the
active outdoor duties required of a professional. Visible Mark of Identification

Signature of the Candidate _____

Place :

Date :

Name & Signature of the Medical
Officer with Seal and
Registration Number

* Strike whichever is not applicable.

** To be signed by a Registered Medical Practitioner holding a Medical degree.

Note : Use photocopy of this Form



Dr. B.R. Ambedkar University Delhi

Fitness Certificate for availing Admission

against Differently Abled Per (PD)/ Persons with Disability Quota

(For Academic Session 2022-23)

(To be submitted at the time of Admission/Document Verification)

Photograph
duly attested
by the officer
who has
certified this
certificate

Certified that Shri/ Km/ Smt. _____ Son/daughter/wife of

Shri/Smt. With Application No. _____

is Physically Handicapped/Persons with Disability due to _____

and he/she is fit for undergoing the following course(s) / Programmes of Study(s) :

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

At Dr. B.R.Ambedkar University Delhi for the Academic Session 2022-23

Date of Issue: _____

Name, Designation & Signature
with date and Office Seal
of the Issuing Authority



Dr. B.R. Ambedkar University Delhi

Format of Certificate for Differently Abled Person (PD)

To be issued by Medical Board from Govt. Hospital
(To be submitted at the Time of Admission/Document Verification)

**Photograph
duly attested
by the officer
who has
certified this
certificate**

Certified that Shri/ Km/ Smt. _____ Son/daughter/wife of

Shri/Smt. With Application No. _____

is person with Disability due to _____

Percentage _____ and he/she is fit to peruse the UG/PG/Mphil/PhD Studies

Member
(Orthopedic Specialist)

Member

Principal Medical Officer

Date:

Seal of Office

Note: The Certificate must be issued by Medical Board of any recognized Government Hospital.



Dr. B.R. Ambedkar University Delhi

UNDERTAKING FOR DEFENCE CATEGORY (TO BE SUBMITTED AT THE TIME OF ADMISSION/DOCUMENT VERIFICATION) (Verification for Academic Session 2022-23)

**Photograph
duly attested by
the officer who
has certified
this certificate**

I _____ Son/Daughter of _____ Application
No. _____ Programme _____ hereby undertake that I fall under the following Priority of
Defence category as tick marked below:-

Priority I : Widows/Wards of Defence personnel/Para Military Personnel killed in action..

Priority II : Wards of Defence Personnel and ex-servicemen/Para Military personnel disable in action and
boarded out from service with disability attributable to military service

Priority III : Widows/Wards of Defence personnel/Para Military personnel who died in peace time with death
attributable to military service.

Priority IV : Wards of Defence personnel/Para Military personnel disabled in service and boarded out from
service with disability attributable to military service.

Priority V : Wards of serving Defence personnel and Ex-Servicemen/para military/police personnel who are in
receipt of Gallantry Awards.

i. Param Vir Chakra

ii. Ashok Chakra

iii. Maha Vir Chakra

iv. Kirti Chakra

v. Vir Chakra

vi. Shaurya Chakra

vii. Sena, Nau Sena, Vayu Sena Medal

viii. Mention in Despatches

ix. President's Police Medal for Gallantry

x. Police Medal for Gallantry

Priority VI : Wards of Ex-Servicemen.

Priority VII : Wives of

i. Defence personnel disabled in action and boarded out from service.

ii. Defence personnel disabled in service and boarded out with disability attributable to military service.

iii. Ex-Servicemen and serving personnel who are in receipt of Gallantry Awards.

Priority VIII : Wards of Serving Personnel.

Priority IX : Wives of Serving Personnel.

Name of Father/Mother _____ Name of Candidate: _____

Rank _____ Address: _____

Service No. _____ Unit _____ Tel No: _____

Signature of Father/Mother _____ Signature of Candidate: _____

Countersigned by: Secretary, Kendriya Sainik Board, New Delhi / Secretary, Rajya or Zila Sainik Board / Officer-in-Charge, Record Office/Concerned Officials of Ministry of Home Affairs in case of Para Military Forces/ Police personnel who are in receipt of Gallantry Awards.

I have checked the original documents and I certify that he/she is entitled for reservation under defence category under priority _____ (Note: The priority must be filled otherwise the claim shall be rejected).

Date :

Place :

Seal/ Signature of the officer

Note: Entitlement card in original issued by Record Officer of the Unit/Regiment of Armed personnel of the Armed Forces in case of Armed personnel or from Home Ministry in case of Para Military Forces / Police personnel who are in receipt of Gallantry Awards.



Dr. B.R. Ambedkar University Delhi

A F F I D A V I T (SINGLE GIRL CHILD)

(MUST BE ON Rs.50/- STAMP PAPER)

I _____ son/wife of _____
(father/mother name)
resident of _____

_____ do hereby make oath and state as under:-

1. That the Deponent is the father / mother of _____
(candidate name)

2. That the deponent's daughter is a Single Girl Child/Twin Daughter/Fraternal Daughter of the family and there is no other male and female child in my family.

Verified at _____ on this _____ that the contents of the above
(place) (date - month - year)
affidavit are true and correct to my personal knowledge and belief.

DEPONENT Signature

Name

Full Address

Seal & Signature of

SDM / First Class Magistrate / Gazetted Officer (not below the rank of Tehsildar)
certifying the aforesaid declaration.



Dr. B.R. Ambedkar University Delhi

**Format of Certificate for Availing against
Kashmiri Migrant Supernumerary Quota
(To be submitted at the time of Admission/Document Verification)**

**Photograph
duly attested by
the officer who
has certified
this certificate**

Certified that Shri/ Km/ Smt. _____ Son/daughter/wife of
Shri _____ resident of _____ is registered as migrant from Jammu
and Kashmir. The registration number is _____ dated _____.

It is also certified that Shri/ Km/ Smt. _____ is registered in Delhi on _____.

Name and Signature of
Deputy Commissioner/
Competent Authority (Office Seal)

Place:

Date:

Note: In reference to GNCTD letter no. DHE 4(52)/Kashmiri Migrants/14-15/6815-20 dated 18-12-2019, no other document than this will be accepted by the university for claiming reservation against Kashmiri Migrants seats.



Dr. B.R. Ambedkar University Delhi

UNDERTAKING BY THE STUDENT WITH RESPECT TO ANTI RAGGING

I, _____ S/D _____ of _____ Mr./ _____ Mrs. _____ /Ms. _____, having been admitted to _____, 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 5 and clause 6.1 of the Regulations 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: 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 _____ on this the _____ of _____



Dr. B.R. Ambedkar University Delhi

UNDERTAKING BY PARENT/GUARDIAN WITH RESPECT OF ANTI RAGGING

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 5 and clause 6.1 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 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) My ward will not indulge in any behave our 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, the admission of 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 _____ on this the _____ of _____

List of OBC approved by SC/ST/OBC welfare department in Delhi

1. Abbasi, Bhishti, Sakka
2. Agri, Kharwal, Kharol, Khariwal
3. Ahir, Yadav, Gwala
4. Arain, Rayee, Kunjra
5. Badhai, Barhai, Khati, Tarkhan, Jangra-Brahmin Vishwakarma, Panchal, Mathul-Brahmin, Dheeman, Ramgarhia-Sikh
6. Badi
7. Bairagi, Vaishnav Swami*****
8. Bairwa, Borwa
9. Barai, Bari, Tamboli
10. Bauria/Bawria(excluding those in SCs)
11. Bazigar, Nat Kalandar(excluding those in SCs)
12. Bharbhooja, Kanu
13. Bhat, Bhatra, Darpi, Ramiya
14. Bhatara
15. Chak
16. Chippi, Tonk, Darzi, Idrishi(Momin), Chimba
17. Dakaut, Prado
18. Dhinwar, Jhinwar, Nishad, Kewat/Mallah(excluding those in SCs) Kashyap(non-Brahmin), Kahar.
19. Dhobi(excluding those in SCs)
20. Dhunia, pinjara, Kandora-Karan, Dhunnewala, Naddaf, Mansoori
21. Fakir, Alvi ***
22. Gadaria, Pal, Baghel, Dhangar, Nikhar, Kurba, Gadheri, Gaddi, Garri
23. Ghasiara, Ghosi
24. Gujar, Gurjar
25. Jogi, Goswami, Nath, Yogi, Jugi, Gosain
26. Julaha, Ansari, (excluding those in SCs)
27. Kachhi, Koeri, Murai, Murao, Maurya, Kushwaha, Shakya, Mahato
28. Kasai, Qussab, Quraishi
29. Kasera, Tamera, Thathiar
30. Khatguno
31. Khatik(excluding those in SCs)
32. Kumhar, Prajapati
33. Kurmi
34. Lakhera, Manihar

35. Lodhi, Lodha, Lodh, Maha-Lodh
36. Luhar, Saifi, Bhubhalia
37. Machi, Machhera
38. Mali, Saini, Southia, Sagarwanshi-Mali, Nayak
39. Memar, Raj
40. Mina/Meena
41. Merasi, Mirasi
42. Mochi(excluding those in SCs)
43. Nai, Hajjam, Nai(Sabita)Sain,Salmani
44. Nalband
45. Naqqal
46. Pakhiwara
47. Patwa
48. Pathar Chera, Sangtarash
49. Rangrez
50. Raya-Tanwar
51. Sunar
52. Teli
53. Rai Sikh
54. Jat ***
55. Od ***
56. Charan Gadavi ****
57. Bhar/Rajbhar ****
58. Jaiswal/Jayaswal ****
59. Kosta/Kostee ****
60. Meo ****
61. Ghrit,Bahti, Chahng ****
62. Ezhava & Thiyya ****
63. Rawat/ Rajput Rawat ****
64. Raikwar/Rayakwar ****
65. Rauniyar *****

*** vide Notification F8(11)/99-2000/DSCST/SCP/OBC/2855 dated 31-05- 2000

**** vide Notification F8(6)/2000-2001/DSCST/SCP/OBC/11677 dated 05-02-2004

***** vide Notification F8(6)/2000-2001/DSCST/SCP/OBC/11823 dated 14-11-2005

¹THE CONSTITUTION (SCHEDULED CASTES) ²[(UNION TERRITORIES)] ORDER 1951
C.O. 32

In exercise of the powers conferred by clause (1) of article 341 of the Constitution of India, as amended by the Constitution (First Amendment) Act, 1951, the President is pleased to make the following Order, namely:—

1. This Order may be called the Constitution (Scheduled Castes) ²[(Union Territories)] Order, 1951.

2. Subject to the provisions of this Order, the castes, races or tribes or parts of, or groups within, castes or tribes, specified in ³[Parts I to III] of the Schedule to this Order shall, in relation to the ²[(Union territories)] to which those parts respectively relate, be deemed to be Scheduled Castes so far as regards members thereof resident in the localities specified in relation to them respectively in those Parts of that Schedule.

⁴[3. Notwithstanding anything contained in paragraph 2, no person who professes a religion different from the Hindu, ⁵[the Sikh or the Buddhist] religion shall be deemed to be a member of a Scheduled Caste.]

⁶[4. Any reference in this Order to a Union territory in Part I of the Schedule shall be construed as a reference to the territory constituted as a Union territory, as from the first day of November, 1956, any reference to a Union territory in Part II of the Schedule shall be construed as a reference to the territory constituted as a Union territory as from the first day of November, 1966 and any reference to a Union territory in Part III of the Schedule shall be construed as a reference to the territory constituted as a Union territory as from the day appointed under clause (b) of section 2 of the Goa, Daman and Diu Reorganisation Act, 1987.]

²[THE SCHEDULE
PART I.—*Delhi*

Throughout the Union territory: —

- | | |
|---|-------------------------------------|
| 1. Adi-Dharmi | 18. Kabirpanthi |
| 2. Agria | 19. Kachhandha |
| 3. Aheria | 20. Kanjar or Giarah |
| 4. Balai | 21. Khatik |
| 5. Banjara | 22. Koli |
| 6. Bawaria | 23. Lalbegi |
| 7. Bazigar | 24. Madari |
| 8. Bhangi | 25. Mallah |
| 9. Bhil | 26. Mazhabi |
| 10. Chamar, Chanwar Chamar, Jatava or Jatav | 27. Meghwal |
| Chamar, Mochi, Ramdasia, Ravidasi, Raidasi, | 28. Naribut |
| Rehgarh or Raigar | ⁷ [29. Nat (Rana), Badi] |
| 11. Chohra (Sweeper) | 30. Pasi |
| 12. Chuhra (Balmiki) | 31. Perna |
| 13. Dhanak or Dhanuk | 32. Sansi or Bhedkut |
| 14. Dhobi | 33. Sapera |
| 15. Dom | 34. Sikligar |
| 16. Gharranmi | 35. Singiwala or Kalbelia |
| 17. Julaha (Weaver) | 36. Sirkiband.] |

1. Published with the Ministry of Law Notifn. No. S.R.O. 1427A, dated the 20th September, 1951, Gazette of India, Extraordinary, 1951, Part II, Section 3, page 1198.

2. Subs. by the Scheduled Castes and Scheduled Tribes Lists (Modification) Order, 1956.

3. Subs. by Act 18 of 1987, s. 19 and the First Sch., for "Parts I to IV" (w.e.f. 30-5-1987).

4. Subs. by Act 63 of 1956, s. 3 and the Second Sch.

5. Subs. by Act 15 of 1990, s. 3, for "or the Sikh".

6. Subs. by Act 18 of 1987, s. 19 and the First Sch., for paragraph 4 (w.e.f. 30-5-1987).

7. Subs. by Act 61 of 2002, s. 2 and Second Sch.

Dr. B. R. Ambedkar University Delhi
ADMISSIONS 2022-23

UNDERTAKING

I, _____

S/o, D/o _____

do hereby undertake that I will submit the following documents at Student Services Division or to the concerned School of Dr.B.R.AUD

| S.No. | Name of Document |
|-------|------------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |

I fully understand that if I do not submit the above said certificate and marks sheets my provisional admission will be cancelled.

Dated: _____

Signature: _____

Name in (Block Letters) _____

Address _____

Mobile No. _____

E-mail ID:- _____

Dr. B. R. Ambedkar University Delhi
ADMISSIONS 2022-23

UNDERTAKING

I hereby undertake the following:

1. I will attend the classes regularly in each semester as per requirement of University Ordinance and in case I fail to fulfill this obligation, Dr. B.R. Ambedkar University Delhi would be within its right to strike off my name from the rolls. I shall also be responsible to see all the notices displayed on the Notice Board/E-mail/Website of the university from time to time.
2. Any excess payment that may be found to have been made as a result of incorrect Scholarship, SWF, Caution Deposits, refunds, etc. or any excess payment detected in the light of discrepancies noticed subsequently will be refunded by me to the University, without raising any objection to it.
3. If there is any change of information submitted in application (such as residence, contact no. etc), I shall inform the University accordingly.

Dated: _____
(Signature of the Candidate)

Name: _____

Dr. B. R. Ambedkar University Delhi

UNDERTAKING

(Strike out whichever is not applicable)

1. I _____ (Name of the candidate) herewith undertake that I have read all the rules of admission for the year 2022-23 and after fully understanding all the rules, I have filled in this application form for admission for the current academic year.
2. I belong to _____ category which is recognized as **SC/ST** Category in _____ state vide G.R No. _____ dated _____.
The serial no. of my caste is _____ and
submitting the caste certificate issued by _____
_____ vide No. _____ dated _____

3. I belong to **OBC/PwD** category and based on this, I am herewith submitting the caste certificate/PwD issued by _____ vide No. _____ dated _____
4. I belong to **Unreserved/General** category
5. The information given by me in application form is true to the best of my knowledge and belief.
6. If at any stage, it is found that I have furnished wrong information and/or submitted false certificate(s), I am aware that my admission stands cancelled and fees paid by me will be forfeited. Further, I will be subject to legal and/or penal action as per the provision of the law.
7. I hereby agree to confirm to any Rules, Acts and Laws enforced and I hereby undertake that so long as I shall be a student of the University I will do nothing either inside or outside the University which may result in compelling the authorities to take disciplinary action against me under the Rules, Acts and Laws of good conduct and behavior in general.

Signature of the Candidate

Dr. B.R. Ambedkar University Delhi

Approval form for Transfer of Admission for UG/PG/MPhil/PhD PROGRAMMES

(Please fill all columns in BLOCK LETTERS)

UG ☐ PG ☐ PhD ☐

| | | | | | | | | | | | | | | | | |
|-----------------------------------|--------------|--|---|--|------------|--|---|--|-------------|--|---|--|---|--|---|--|
| Name of the Student | | | | | | | | | | | | | | | | |
| Application No. | | | | | | | | | | | | | | | | |
| Programme in which admitted | | | | | | | | | | | | | | | | |
| Admitted in Cutoff/admission list | 1 | | 2 | | 3 | | 4 | | 5 | | 6 | | 7 | | 8 | |
| Date of admission | | | | | | | | | | | | | | | | |
| Fee paid (amount INR) | | | | | | | | | | | | | | | | |
| Fee Challan no. | | | | | | | | | | | | | | | | |
| Fee paid through | Demand Draft | | | | Debit Card | | | | Credit Card | | | | | | | |

| | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|
| I may be admitted to the programme | | | | | | | | | | | |
| Best Four Percentages as per programme in which transfer is sought (<i>applicable for only BA Students</i>) | | | | | | | | | | | |
| Cut off/admission list with date in which transfer is being opted. | | | | | | | | | | | |

My previous admission may therefore be cancelled.

Dated: _____

Signature of the Student

| | |
|---|---|
| <p>(FOR USE BY CONCERNED SCHOOL OF STUDY STUDENT WAS ADMITTED)</p> <p>Admission from the programme</p> <p>_____ stands cancelled.</p> <p>Verified by (Name): _____</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> Faculty Dean of School </div> | <p>FOR USE BY CONCERNED SCHOOL OF STUDY STUDENT IS BEING TRANSFERRED)</p> <p>Student may be transferred to (programme name)</p> <p>Verified by (Name): _____</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> Faculty Dean of School </div> |
|---|---|

(FOR USE BY STUDENT SERVICES)

Differential fees to be paid /adjusted, if any.

| Fee Heads | Fee Paid as per previous admission | Fee as per programme in which admission approved | Balance (Fee to be paid/adjusted/refunded as per programme in which admitted) |
|-----------|---------------------------------------|--|--|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

An amount of Rs. _____ may be collected/adjusted/refunded. *(strike of whichever is not applicable)*

Assistant

AR, SS

Dean, Student Services

(FOR USE BY FINANCE DIVISION)

Fee received (in case of Demand Draft)

Name of the Bank: _____ Branch: _____

Draft No. _____ Dated _____ Amount _____

Challan No. _____

Fee received (in case paid through Debit /Credit card on campus)

Debit Card Credit card Name of the Bank: _____

Challan No. _____

Differential fee, if any to be paid/adjusted/refunded _____

Payment details:

| | |
|------------------|------------------|
| Demand Draft No | Debit Card |
| Name of the Bank | Credit Card |
| Branch | Name of the Bank |
| Dated | Date |
| Amount | Amount |

OR

Cashier

DR, Finance

Controller of Finance

Dr. B.R. Ambedkar University Delhi
Doctor of Philosophy (PhD)
Admission Form - 2022

(Please fill all columns in BLOCK LETTERS)

Paste latest
Photo

Programme Name: _____

- 1 Name: _____
- 2 Date of Birth: _____
- 3 Gender: _____
- 4 Father's Name: _____ Father's Mobile no. _____
- 5 Mother's Name: _____ Mother's Mobile no. _____
- 6 Address:
- A) Correspondence Address: _____
- _____ Tel. No. _____
- B) Permanent Address: _____
- _____ Tel. No. _____
- 7 Emergency contact no. _____
- 8 Family income (Annual): _____
- 9 Details of Examinations Passed: (10th onwards)

| S. No. Exam | Name of | Main Subjects | Year of Passing | Board / University | Marks(%) |
|----------------|---------|---------------|-----------------|--------------------|----------|
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |

- 10 Do you wish to avail fee waiver, Yes____or No____, if yes, then please submit any of the following documents:
(i) Income Certificate (ii) BPL Ration Card (yellow coloured) (iii) Income Ration Card (pink coloured)
- 11 Whether applied in EWS category, Yes No if yes, then please submit EWS certificate.
- 12 Fee Payment Details (in case of Demand Draft)

Name of the Bank: _____ Branch: _____

Draft No. _____ Dated _____ Amount _____

- 13 Fee Payment Details (in case you wish to pay through Debit /Credit card on campus)

Debit Card Credit card Name of the Bank: _____

DECLARATION

I hereby declare that the particulars given above are correct to the best of my knowledge and that on admission I shall abide by the rules/regulations and discipline of Dr. B. R. Ambedkar University Delhi. I undertake that I shall NOT participate in ragging in any form and will report any incident of ragging which I notice in the university and hostel.

Dated:-

Signature of the Candidate

(FOR USE BY CONCERNED SCHOOL OF STUDY)

Checked the following certificates/documents with the original certificates/documents and found in order as per claim of the student.

| Particulars | Please "WRITE" details below in block letter |
|--|---|
| Name of Student | as on mark sheet in block letter |
| Date of Birth | as on mark sheet in block letter |
| Father's Name | as on mark sheet in block letter |
| Mother's Name | as on mark sheet in block letter |
| Certificate of qualifying Exam | (10 th) (12 th) |
| Certificate for Date of Birth | (14 th) |
| Document of NCT Category Delhi Region Outside Delhi Region | .A. <input type="checkbox"/> '''' Degl'ee |
| Reservation Category/Caste Certificate | () . s€ ST IBM S€,C € \\(I3ctciicc) P\\ f9 |
| EWS Certificate | Yes / No |
| Anti-Ragging Affidavit | Yes / No |
| Migration Certificate | Yes / No |
| Provisional Certificate | Y> No |

Candidate has been admitted / offered in the _____ admission list.

Whether candidate has been given Provisional Admission? If yes, reason thereof _____

Verified by (Name & Signature): _____ Dean (Signature & Stamp) _____

(FOR USE BY STUDENT SERVICES)

Fee Waiver : Yes / No

If yes, under fee slab: _____

Amount of fee to be collected _____

(Admin Staff Student Services)

Dean Student Services

Dr. B.R. Ambedkar University Delhi
Masters /MDes Admission Form - 2022

(Please fill all columns in BLOCK LETTERS)

Paste latest
Photo

Programme Name: _____

1 Name: _____

2 Date of Birth: _____

3 Gender: _____

4 Father's Name: _____ Father's Mobile no. _____

5 Mother's Name: _____ Mother's Mobile no. _____

6 Address:

A) Correspondence Address: _____

_____ Tel. No. _____

B) Permanent Address: _____

_____ Tel. No. _____

7 Emergency contact no. _____

8 Family income (Annual): _____

9 Details of Examinations Passed: (10th onwards)

| S. No. Exam | Name of | Main Subjects | Year of Passing Board / University | Marks(%) |
|----------------|---------|---------------|------------------------------------|----------|
| (i) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |

10 Do you wish to avail fee waiver, Yes____or No____, if yes, then please submit any of the following documents:

(i) Income Certificate (ii) BPL Ration Card (yellow coloured) (iii) Income Ration Card (pink coloured)

11 Whether applied in EWS category, Yes No if yes, then please submit EWS certificate.

12 Fee Payment Details (in case of Demand Draft)

Name of the Bank: _____ Branch: _____

Draft No. _____ Dated _____ Amount _____

13 Fee Payment Details (in case you wish to pay through Debit /Credit card on campus)

Debit Card Credit card Name of the Bank: _____

DECLARATION

I hereby declare that the particulars given above are correct to the best of my knowledge and that on admission I shall abide by the rules/regulations and discipline of Dr. B. R. Ambedkar University Delhi. I undertake that I shall NOT participate in ragging in any form and will report any incident of ragging which I notice in the university and hostel.

Dated:-

Signature of the Candidate

(FOR USE BY CONCERNED SCHOOL OF STUDY)

Checked the following certificates/documents with the original certificates/documents and found in order as per claim of the student.

| Particulars | Please "WRITE" details below in block letter |
|--|---|
| Name of Student | us on mark sheet in block letter |
| Date of Birth | as on mark sheet in block letter |
| Father's Name | as on mark sheet in block letter |
| Mother's Name | as on mark sheet in block letter |
| Certificate of qualifying Exam | (11 th) (12 th) |
| Certificate for Date of Birth | (10 th) |
| Document of NCT Category ___ Delhi Region Outside Delhi Region | B.A. <input type="checkbox"/> |
| Reservation Category/Caste Certificate | General SC ST UM SEIC C \\(Defence) I \\ L4 |
| EWS Certificate | Yes No |
| Anti-Ragging Affidavit | Yes No |
| Migration Certificate | Yes No |
| Provisional Certificate | Yes / No |

Candidate has been admitted / offered in the _____ admission list.

Whether candidate has been given Provisional Admission? If yes, reason thereof _____

Verified by (Name & Signature): _____ Dean (Signature & Stamp) _____

(FOR USE BY STUDENT SERVICES)

Fee Waiver : Yes / No If yes, under fee slab: _____
Amount of fee to be collected _____

(Admin Staff Student Services)

Dean Student Services

Dr. B.R. Ambedkar University Delhi
BA/BVOC/BBA
Admission Form - 2022

(Please fill all columns in BLOCK LETTERS)

**Paste latest
Photo**

Programme Name: _____

- 1 Name: _____
- 2 Date of Birth: _____
- 3 Gender: _____ Aadhar No. _____
- 4 Father's Name: _____ Father's Mobile no. _____
- 5 Mother's Name: _____ Mother's Mobile no. _____
- 6 Address:
A) Correspondence Address: _____

_____ Tel. No. _____
B) Permanent Address: _____

_____ Tel. No. _____
- 7 Emergency contact no. _____
- 8 Family income (Annual): _____
- 9 Details of Examinations Passed: (10th onwards)

| S. No. Exam | Name of | Main Subjects | Year of Passing Board / University | Marks(%) |
|----------------|---------|---------------|------------------------------------|----------|
| (i) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |

- 10 Do you wish to avail fee waiver, Yes____or No____, if yes, then please submit any of the following documents:
(i) Income Certificate (ii) BPL Ration Card (yellow coloured) (iii) Income Ration Card (pink coloured)
- 11 Studied Hindi language upto which Standard/Class, please mention _____
- 12 Whether applied in EWS category, Yes No if yes, then please submit EWS certificate.
- 13 Fee Payment Details (in case of Demand Draft)

Name of the Bank: _____ Branch: _____
Draft No. _____ Dated _____ Amount _____

Debit Card Credit card Name of the Bank:

I hereby declare that the particulars given above are correct to the best of my knowledge and that on admission I shall abide by the rules/regulations and discipline of Dr. B. R. Ambedkar University Delhi. I undertake that I shall NOT participate in ragging in any form and will report any incident of ragging which I notice in the university and hostel.

Signature of the Candidate

Checked the following certificates/documents with the original certificates/documents and found in order as per claim of the student.

| Particulars | Please “WRITE” details below in block letter |
|---|---|
| Name of Student | us on mark sheet in block letter |
| Date of Birth | as on mark sheet in block letter |
| Father's Name | as on mark sheet in block letter |
| Mother's Name | as on mark sheet in block letter |
| Certificate of qualifying Exam | (10 th) (12 th) |
| Certificate for Date of Birth | (10 th) |
| Document of NCT Category ____ Delhi Region Outside Delhi Region | 12 th Certificate <input type="checkbox"/> |
| Reservation Category/Caste Certificate | (O) RC SC ST K M SfuC C W (De fence) PLY D |
| EWS Certificate | Yes / No |
| Anti-Ragging Affidavit | Yes / No |
| Migration Certificate | Yes No |
| Provisional Certificate | Yes / No |

. Best four %: Candidate has been admitted /

Whether candidate has been given Provisional Admission? If yes, reason thereof

(FOR USE BY STUDENT SERVICES)

(Admin Staff Student Services)

Dean Student Services

Dr. B.R. Ambedkar University Delhi

Approval form for Withdrawal of Admission

(Please fill all columns in BLOCK LETTERS)

I wish to withdraw my admission from Dr. B.R. Ambedkar University Delhi. My admission may therefore be cancelled and the fee deposited may be transferred through NEFT in the Bank A/C mentioned below.

| | | | |
|-----------------------------|--------------|-------------|-------------|
| Name of the Student | | | |
| Application No. | | | |
| Programme in which admitted | | | |
| Date of admission | | | |
| Fee paid (amount INR) | | | |
| Fee Challan No. | | | |
| Fee paid through | Demand Draft | Debit Cards | Credit Card |

Please attach original Fee Challan with the form.

| | |
|---|--|
| Account Holder Name (in the name of student) | |
| Account Number | |
| IFS Code | |
| Bank Name | |

Please enclose bank passbook copy/ cancelled cheque.

Signature of Student

(FOR USE BY SCHOOL OFFICE)

- Original Migration certificate has been handed over to the student on his/ her withdrawal request.

Yes

No

- Fee may be processed by the Student Services Division as per AUD Rules.

Dealing Assistant

Assistant Registrar

Dean