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half signature on the form and
half on the photo

For Office use only

Form No. _____

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APPLICATION FORM - PhD

Academic Year 2019 - 20

Please complete this form in BLOCK LETTERS

1. Choose Discipline

- Business Management
 Aurobindo Studies
 Interdisciplinary Studies

2. Full Name (as in Xth Std. mark sheet)

First Name	Middle Name	Surname
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3. Male
 Female
 Third Gender

4. Date of Birth (as per 10th Std. mark sheet - DD/MM/YYYY)

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5. Nationality

6. Blood Group

7. Category (Please submit relevant certificate)

- General
 OBC
 SC / ST

8. Are you Differently Aabled? Yes / No

(If yes, kindly provide certificate from competent authority)

9. Academic Background

Level	Year of Passing	School / College	Board / University	Subjects	Aggregate Marks / Division
Class X					
Class XII					
Diploma					
Graduation					
Post-Graduation					
M. Phil					
Any Other					

10. Details of JRF / NET / SLET / SET / GSET

Name of Examination	Subject / Discipline	Notification No.	Date / Year	Other Details

11. Complete Address

Address for Correspondence :	
City:	State: Pin Code:
Permanent Address :	
City:	State: Pin Code:
Home Telephone No.:	Emergency Contact Number:
Parent's Mobile:	Parent's Email:
Candidate's Mobile:	Candidate's Email:

12. Family Background

Relation	Father	Mother	Sister / Brother	Sister / Brother
Name				
Educational Qualification				
Profession				
Organization / Designation				
Annual Income				

13. Would you require on-campus accommodation during the period of your study at AURO University? (Tick appropriate box)

Yes <input type="checkbox"/>	No <input type="checkbox"/>
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*Subject to availability

14. Would you require Transportation Facilities? (Tick appropriate box)

Yes <input type="checkbox"/>	No <input type="checkbox"/>	If Yes, Location.....
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15. Two References. (Please mention references not related to you)

Reference 1:	Reference 2:
Name:	Name:
Address:	Address:
Telephone:	Telephone:
Email:	Email:
Mobile:	Mobile:

16. Proposed Research Statement

This should include your research inclination/s, research area/s; what interests you the most about your research pursuit and the way you wish to contribute to the domain of knowledge.

17. Details of your research experience and publications, if any:

1	
2	
3	
4	

18. Have you participated in any sports at School/ College/ University level? Yes / No

If yes, please specify and attach relevant documents

District	State
National	International

19. Declaration

I confirm that the information provided by me is complete and true. Any information which is subsequently found to be untrue would disqualify me for further continuation in the University. I consent to the processing of my information by AURO University.

Candidate's Signature Date

Parent's Signature Date

20. Enclosures with application (Please tick)

- | | |
|--|--|
| <input type="checkbox"/> Class 10th Mark sheet | <input type="checkbox"/> Post Graduate Mark sheet |
| <input type="checkbox"/> Class 12th Mark sheet | <input type="checkbox"/> 2 Passport size photographs |
| <input type="checkbox"/> Under Graduate Mark sheet | <input type="checkbox"/> In case of downloaded application form, please attach Demand Draft of Rs. 2000. |
- For application form filled online, please pay online.

Please return completed application form along with enclosures to the address given below.

Director Admissions
AURO University

Hazira Road, Opp ONGC
Surat 394510,
Gujarat,
India

For any further clarification / information call us at +91 261 4088101 / 04 or email us at admissions@aurouniversity.edu.in