Department of Inter-Disciplinary Studies

Institute of Integrated Himalayan Studies

(UGC Centre for Excellence)

Himachal Pradesh University, Gyan Path, Summer Hill Shimla-5

M.Sc. Environmental Science

(Note: Please attach two extra passport size photographs and attested copies of the certificate of Matriculation for showing the date of birth, Result card/Marks card of qualifying examination and SC/ST Category certificate with this form. If you are working somewhere then provide NOC from the employer)

			_	_						
	Name of the Candida	te		(In	CAPITAL					
1.	Letters)	Please Affix PP size (3.5 cm x 4.5 cm) photograph duly attested by Class I Gazatteed officer								
2.	Father's Name:									
3.	Mother's Name									
4.	Date of Birth (As in I									
5.	Age as on 1 st July, 20									
6.	Sex (Male / Female)									
7.	Category (SC/ST/Genl/Physically Handicapped/ Cultural/Sports)									
8.	Are you H.P. Bonafic	le: Yes/ No)								
	(If yes, attach attested	d copy of Bonafide	Certificate)							
9.	Details of Qualifying Examination (Please attach attested copies of the result card)									
S. No.	Exam Passed/ Appeared	Board/ University	Year of Passing	Marks Obtained	Maximum Marks	%*	Exam** Roll No			
1.	Matriculation or									
1.	equivalent									
2.	10+2 or equivalent									
3.	Graduation (B.A /									
	B.Sc./ B.Com									
	/BBA/ B.Tech.) or									
	equivalent									
5.	Others									
Note:	■	o two decimal place No of Qualifying E		must be giv	ren					
10.	Mobile No	Landline								
11.	Address for Correspondence									
						PIN				
12.	Permanent Address _									
						PIN				

13.	Details	of	Fee	deposited,	Amount	Rs.		D.D/IPOs	No			
	Dated	/_		/20								
4.	-		_	_	-	-	any other Institution	on form attending				
		<u>D</u>	eclara	tion by the	Applican	t and th	ne Guardian					
1.	I declare that all the information given by me in this application form is correct to the best of my knowledge. I am conscious of the fact that if any of the information is found to be incorrect, my admission is liable to be cancelled.											
2.	I have read carefully the Handbook of Information supplied by the University and I undertake to abide by the rules and regulations of the H. P. University, Shimla.											
3.	I hold myself responsible for payment of University dues on dates according to the schedule given in the Handbook of Information.											
4.	I shall fulfill the attendance requirements as given in the Handbook of Information, failing, which I shall have no claim to sit in the examinations.											
5.	I declare that if I am found to have been involved in the act/s of ragging / indiscipline / misconduct during my studie at the Institution / Hostels / any premises of the University, I may be dealt with as per provision of statute 23.A an recommendations of the Committee constituted by the Hon'ble Supreme Court of India in SLP No. 24295 of 200 (Raghvan's Committee Report).											
Da	ıte:/	/20)	Signature of t	he Father / Gu	ardian	Signature	of the Applicant				
				Fo	r Office Us	e Only						
1. D	Diary Numbe	er:		2. I	Roll Number A	Assigned:	3. Centre A	Assigned:				
4. C	Category :			5. I	nternal/Open:		6. Group:					
7. A	Age :Within	Age / (Overage	: 8. I	H.P. Bonafide	Yes/No:	9. Marks ir	n Q. Exam (%):				
10.	Eligibility:	Eligibl	e/Ineligi	ble :								
11.	Reason, if r	ot elig	ible:									
12. Remarks, If any:		Che	ecked by:		Checked by	Checked by:						

NOTE: Please read carefully the eligibility conditions given in the prospectus before filling the application form.

Signature

Signature

The application form duly filled along with the required documents and D.D / I.P.Os of Rs.500/- (for General Category) and Rs. 350/- (SC/ST/BPL from H.P State) in favour of **Director, IIHS,** H. P. University, Shimla-5, should be submitted to **The Director, Institute of Integrated Himalayan**Studies, Himachal Pradesh University, Summer Hill Shimla-171005