FORM - P

DOCTOR HARISINGH GOUR VISHWAVIDYALAYA, SAGAR (MP) INDIA

(A CENTRAL UNIVERSITY) Form No. 3833

PROGRAMME REGISTRATION FORM (One time only in Triplicate Copy)

Programme Name ....Ph.D. 1st Sem.

Department (for PG)/School (for UG).....PHILOSOPHY.....

Roll Number of Entrance Examination.....4260012.....

(Note: For all codes use the enclosed Code List)

1. Programme Registration No.

Sem.	I	II	III	IV	V	VI	VII	VIII	IX	X		G	H	R	S	DM	Programme Code			
Y	1		Level		School/Dept.			*	Sr. No.		-									
Y	1	7	4		2	4		00	2	1		1	0	1	2	5	4	0	2	0

(Applicable for Registration 2014-15 on ward Academic Session) * For courses mentioned in Code List

2. Name (as per 10th Mark Sheet)

D	I	N	E	S	H		K	U	M	A	R			

3. Father's Name (as per 10th Mark Sheet)

P	A	T	I		R	A	M							

4.. Mother's Name (as per 10th Mark Sheet)

C	H	A	N	D		B	A	I						

5. Name of Father's Father

B	H	A	G	W	A	L	I							

6. Name of Mother's Father

R	A	M	E	S	H									

7. Address Guardian/ Parent

Piperod, Mungeli (CH)

PIN 495334

Phone No. (with STD) Res. Mobile No. 7748994907

Phone No. (with STD) Off. E-mail ID: lineshneo90@gmail.com

Tick '√' Mark whichever is applicable

8.Gender (G)

Male	Female	Trans Gender	Code
✓			1

9. Physical Disability (H)

None	PI	VI	SI	MR	OT	Code
✓						0

10. Religion (R)

H	M	S	C	J	B	P	OT	Code
✓								1

11.Socio-Economic Status (S)

GEN	SC	ST	OBC	OBN	Code
	✓				2

12.State of Domicile (DM)

Use State Short form Code		Code
C	H	5

Signature of Student

Signature of Programme Advisor

Professor & Head
Department of Philosophy
Dr. H. S. Gour Vishwavidyalaya
Sagar (M.P.)- 470003

Signature of Convener DUGC/DPGC

Professor
Department of Philosophy
Dr.H.S.Gour V.V.Sagar (M.P.)
470003