



FORM - P
DOCTOR HARISINGH GOUR VISHWAVIDYALAYA,
SAGAR (MP) INDIA
(A CENTRAL UNIVERSITY) Form No...3641
PROGRAMME REGISTRATION FORM (One time only in Triplicate Copy)



Programme Name Ph.D.
 Department (for PG)/School (for UG)..... Philosophy
 Roll Number of Entrance Examination..... 24260005
 (Note: For all codes use the enclosed Code List)

[Signature]

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	6	4	2	4	0	0	1			1	1	1	5	14	4020

(Applicable for Registration 2014-15 on ward Academic Session)

* For courses mentioned in Code List

2. Name (as per 10th Mark Sheet)

R	O	O	P		S	I	N	G	H		L	O	D	H		
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3. Father's Name (as per 10th Mark Sheet)

P	R	A	H	L	A	D		S	I	N	G	H				
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4. Mother's Name (as per 10th Mark Sheet)

M	A	N		K	U	N	W	A	R							
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5. Name of Father's Father

R	A	T	N		S	I	N	G	H		L	O	D	H		
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6. Name of Mother's Father

S	U	M	R	A	N		S	I	N	G	H					
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7. Address Guardian/Parent

Village - Imaliya Khurd, post - Baradzi, Tahsil - Makhon
Dist - Sagar (M.P.)

PIN 470442

Phone No. (with STD) Res.

Mobile No. 7697987780

Phone No. (with STD) Off.

E-mail ID: szoop Singh1944@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
☒	☐	☐	☐	☐	☐	1

10. Religion (R)

H	M	S	C	J	B	P	OT	Code
☒	☐	☐	☐	☐	☐	☐	☐	1

11. Socio-Economic Status (S)

GEN	SC	ST	OBC	OB	Code
☐	☐	☐	☐	☒	5

12. State of Domicile (DM)

Use State Short form Code	Code
M P	1 4

Signature of Student

Signature of Programme Advisor

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

Signature of Professor & Head
 Department of Philosophy
 Dr. H. S. Gour V.V. Sagar (M.P.)
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