

(Declared U/s 3 of UGC Act, 1956 vide Notification No. F.9-15/2001-U.3 of the Ministry of Human Resource Development, Govt. of India.)

Karad, Dist. Satara (Maharashtra State) Pin: 415 110

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Faculty: 3.Research Topic:		2.Subje	ct:		Affix Passport Photograph
To, The Registrar Krishna Institute of Med Karad	dical Sciences D	Deemed University	,		
Sir / Madam, I hereby apply this or any other Degre 1.Name in full (in Capit (Beginning with Surnam)	e in this or any	other University. 1	·	about myself are	as follows:
	ie)	(Surname)	(Name)	(Father/Husband	d) (Mother's Name)
2.Date of Birth	:				
3. Gender	: Male/Female	e (Strike out which	ever is not applicable	e)	
4. Nationality	:				
5.Permanent Address:					
6. Present (Local) Addre	≥ss:				
7.I belong to the catego (Please Tick the approp	•	below			

Open Category	SC	ST	DT (A)	NT (B)	NT(C)	NT (D)	SBC	OBC
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6.

8. Present Occupation/Employment

(Give Name and Address of the Employer)

12.	Details of professional experience, if any (Attach necessary Certificates): (i) Nature of Professional Experience:
	(ii) The Institute where Professional experience was gained:
	(iii) Period of Professional experience:
Brie	f Synopsis of the research work to be attached.
	Name and Signature of applicant