



Application Form
DEPARTMENT OF EDUCATION

Magadh University, Bodhgaya - 824 234 (BIHAR)
Ph. 0631-2200012 (O), 2200491 (Fax)

Form No.
Downloaded version

Note : To be filled by the candidate and send by Registered/Speed Post or by hand.

Fill the Application Form very carefully. Completely filled in Application Form along with all required documents should be sent to **Director, Department of Education, Magadh University, Bodhgaya 824 234, (Bihar)** only by Registered/Speed post or by Hand. Application Forms sent to any other office of the University will not be entertained. Downloaded Application Form must be accompanied by DD of **Rs. 1000/- (Rupees one thousand only)** for Gen. & Other Categ. and **Rs. 500/- (Rupees five hundred only)** for SC/ST/PH (including Caste Certification) Category in favour of **Director, Dept. of Education., M.U. BodhGaya** payable at **Bodhgaya**. Application Form without requisite fee (Bank Draft) will not be entertained. Keep one box blank between two words.

Self Attested
Coloured Photograph

Signature of the Applicant

- 1.. Name of the Programme applied for :
2. Name of the applicant in BLOCK LETTERS (as per Secondary School Examination certificate) in Roman Script:
3. Name in Devnagari Script :
4. Father's Name :
5. Mother's Name :
6. Permanent Address : .

 PIN
7. Address for Correspondence :

 PIN

City	District	State
<input type="text"/>	<input type="text"/>	<input type="text"/>
8. Mobile No. 9. Aadhaar No.
10. E-mail address (if any) :
11. Date of Birth :

Date	Month	Year	
12. Gender : Male Female Transgender
13. Caste :
14. Category :

General	EWS	SC	ST	EBC (BC-I)	BC (BC-II)	BCW	PH	Percentage of PH
(Tick (✓) in appropriate box)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* Attach relevant documents								
15. Category of PH

OH	<input type="checkbox"/>	Visual Impaired	<input type="checkbox"/>	Hearing Impaired	<input type="checkbox"/>
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16. Nationality : Indian Other if other please specify :

नोट : अभ्यर्थी आवेदन फार्म एवं बैंक ड्राफ्ट की छायाप्रति अवश्य रख लें।

17. Region Rural Urban

18. Marital Status : (✓) Married Unmarried

19. Details of Application fee :

(i) DD No. Date Amount Bank Payable at.

20. Educational Qualification (Matriculation onwards)

Name of the Exam Passed	Name of the College/School	Board / University	Year of Passing	Full Marks	Marks Obtained	% of Marks	Division/ Class

DECLARATION BY THE APPLICANT

I (Name) hereby declare that I have read and understood the conditions for the eligibility of the Course/programme for which I seek admission. I declare that I fulfil the minimum eligibility criteria and have provided the required information in this regard in the Application Form. In the case of any information being found incorrect or misleading, my candidature shall be liable to be cancelled by the University at any stage and I will not be entitled for refund of any fee paid by me to the University.

Date :

अभ्यर्थी का हस्ताक्षर (हिन्दी में)

Signature of the Applicant (In English)

Enclosures :

1. 2.
3. 4.
5. 6.