



Application Form No. _____

Roll No. _____
(To be filled by Office)

University Enrolment No. _____
(If the candidate has earlier passed and/or was admitted to any course at the University of Delhi)

Amar Jyoti Institute of Physiotherapy (UNIVERSITY OF DELHI) Bachelor of Physiotherapy 2018-19

- NOTES : 1. THE APPLICATION FORM SHOULD BE SUBMITTED BY June 18, 2018. (4.00 p.m.)
2. SUBMIT PERSONALLY/SEND PREFERABLY BY REGISTERED POST.
3. COMPLETE ALL ENTRIES.

APPLICATION FORM (USE CAPITAL LETTERS ONLY)



Personal Information

First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>
(Date)	(Month)	(Year)

Age as on 31st Dec., 2018

<input type="text"/>	<input type="text"/>	<input type="text"/>
(Years)	(Months)	(Days)

Gender

<input type="text"/>	<input type="text"/>	<input type="text"/>
Male	Female	Transgender

Category (Please tick **only one**)
(Enclose Certificate/Sponsorship Certificate of competent authority on prescribed format if applying for Reserved category/OH/NRI category)

GEN	<input type="text"/>	SC	<input type="text"/>	ST	<input type="text"/>
NRI	<input type="text"/>	Orthopaedically Handicapped	<input type="text"/>		

Separate form is required to be filled by unsuccessful general/ reserved candidate want to be considered for NRI category



DECLARATION

I hereby declare that particulars stated in this application and enclosures, are true to the best of my knowledge and belief. I have read the General Rules and Regulations and satisfied myself that I fulfill all the eligibility requirements prescribed. In the event of my being found ineligible at any stage, I understand that I will be refused the opportunity and my admission will be cancelled. If admitted, I promise to abide by the Rules, Regulations, Discipline norms and sexual harassment policy of the Institution/University.

Date: _____

Place: _____

(Signature of Applicant)

I have fully read the information furnished by my son /daughter and affirm that it is true. I understand that if it is proved that the information is fraudulent, my wards admission will be cancelled with immediate effect and I will be liable for criminal prosecution.

I have also read the general rules and regulations and have satisfied my self that my ward satisfies all eligibility requirements. Furthermore I will make all attempts to ensure that my ward abides by all the rules, regulations, discipline and norms and sexual harassment policy of the Institution /University.

Date: _____

Place: _____

(Signature of Father/Mother/Guardian)

Name : _____

Relationship : _____

(Duly filled Declaration is mandatory to be submitted.)



Schedule Caste/Schedule Tribe Candidate CERTIFICATE

(A) To be issued by District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/ Additional Deputy Commissioner/Deputy Collector/1st Class Stipendiary Magistrate/City Magistrate/Sub-Divisional Magistrate/ Taluk Magistrate/Executive Magistrate/Extra Assistant Commissioner/Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate / Revenue Officer not below the rank of Tehsildar/Sub-Divisional Officer of the area where the candidate and/or his/her family normally resides/Administrator/ Secretary to Administrator/Development Officer (Lakshadweep Islands).

This is to certify that Sh./Ku. _____

Son/Daughter of Sh./Smt. _____

of Village/Town _____

In District Division _____

Of the State/Union Territory _____

Belongs to the _____

Caste/Tribe which is recognized as Scheduled Caste/Scheduled Tribe.

Place & Date : _____ Signature _____

Name (In Capital Letters) _____

(Official Seal)

Designation _____

ALTERNATIVE

(Applicable only to those persons who have migrated from one State to another for purpose of employment, education etc.)

It is certified that he/she belongs to the _____ Caste/Tribe which is recognized as Scheduled Caste/Scheduled Tribe in the State Union Territory _____ on the basis of the Scheduled Caste/ Scheduled Tribe Certificate issued by _____ (Name of issuing authority)

Vide No. _____ Date _____ to Mr./Mrs. _____

Father/Mother of Sh./Ku. _____ of Village/Town _____

in _____ District Division _____ in the State/Union Territory _____

Place & Date : _____ Signature _____

Name (In Capital Letters) _____

(Official Seal)

Designation _____

Please delete the words, which are not applicable. Only True Copy/Attested True Copy of the Certificate attested by the Headmaster/Principal of school or Gazetted Officer be submitted.



Non-Resident Indian (NRI) SPONSORSHIP CERTIFICATE

For admission of Mr./Ms. _____ to Bachelor of Physiotherapy Course at Amar Jyoti Institute of Physiotherapy, Karkardooma, Vikas Marg, Delhi.

I _____
(Name of Sponsor)

Citizen of _____ Resident of _____

(Full Address & Country)

Passport No. _____ Issued on _____ at _____

and Valid Until _____ hereby Sponsor Mr. /Miss _____

Son/Daughter of _____ Resident of _____

(Full Address & Country)

Citizen of _____ for admission to the Bachelor of Physiotherapy Course at Amar Jyoti Institute of Physiotherapy, Karkardooma, Vikas Marg, Delhi, India. I undertake full responsibility for payment of fees and other expenses until the completion of the program (4½ years duration).

Mr./Ms. _____ (Name of the Candidate)

is my _____ (write the relationship).

Date _____

Signature & Seal of
Authorized Notary

Signature of Sponsor

Name in Capital Letters

Name in Capital Letters

Full Postal Address :

Full Postal address :

Note : This certificate is to be duly filled up and returned along with the application form.



Amar Jyoti Institute of Physiotherapy

UNDERTAKING

(For candidates appeared 12th class in March 2018)

I _____ s/o, d/o Sh. _____ hereby
declare that I have not submitted the following documents:

1. 12th Pass Certificate
2. 12th Mark sheet provided by CBSE/Online

I will submit the above mentioned document/s before Saturday, 16th June 2018. I completely understand that if any information to be found wrong, the Institute have full authority to cancel my admission.

Signature of candidate