## **Application Form For Admission**

## Sl. No.:....

## into the Under-Graduate/Degree/Diploma/Certificate Programme of

## INSTITUTE OF TAI STUDES AND RESEARCH

	MORANHAT - 785670 (ASSAM)									
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	DIBRUGARH UNIVERSITY	y of the state of								
	(Fill in comital latters and aut (2) and a latter and aut (2)	ESTD .1997								
	(Fill in capiţal letters and put '✓' mark wherever applicable)	ESTD -1997								
1	Applicants Name in Full (BLOCK CAPITALS)									
1. /	Applicants Name in run (BLOCK CAPITALS)	PANHA								
	Surname Mr./Miss/Mrs. Name									
2	Surname Mr./Miss/Mrs. Name Father's Name :									
	Mother's Name :									
4.										
••	Name, Occupation and Address	•••••								
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	Name Occupation									
	Pin									
5	Address for correspondense	••••••								
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	Pin:									
	Mobile E-mail:									
6.	Date of Birth: Day Month Year Nationality:									
	(Attach H.S.L.C Certificate)	•••••								
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9.	Blood Group:	iaineu								
	. Community: SC ST(P) ST(H) OBC MOBC General									
	Where to reside? At home Institute Hostel Outside									
	. Are you employed? Yes No									
	(If yes, submit no objection certificate from the employer)									
14.	Are you on deputation? Yes No									

(If) yes name of the School/ College/ Department/Organization .....

15.	Do you have	Registration Numb	oer of the U	niversity:	Yes	s No	<b>–</b>	ESTD . 1997	
		e Number					⊐ Issue	E DATE	
16.		Qualification startir				2 0.00 01	10040	12	
(Attach attached copies mark sheet and certificate of all examination)									
Γ	Examination	Board/Council/	Roll No.	Year of	Div./	Percentage	Subject Ta	ken	
	Passed	University		Passing	Class	of Marks	susject 1u	KOII	
	10th Standard								
	10+2								
	10+2+3			*					
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18. Any Extra curricular Activities (Mention the activities and furnish testimonials):  20. Are you undergoing any course of study at present? If yes, give details.  UNDERTAKING  I declare that, if admitted, I shall abide by the Statutes. Ordinance, Rules, Regulations, Orders etc. of the									
Dibrugarh University and Institute of Tai Studies & Research that will be in force from time to time. I submit myself to the disciplinary jurisdiction of the Vice-chancellor/Director and other authorities of the University/ Institute who may be vested with such powers under the Act, Statutes, Ordinances, Orders and the Rule that have been framed there under by the University/Institute.  I also declare that information given above are true and complete to best my knowledge and belief and if any them is found to be incorrect, my admission shall be liable to be cancelled and I shall be liable to such other disciplinary action as may be decided upon by the University/Institute.									
	Date:		·			Full Sign	ature of the	e applicant	
For Office Use Only									
	ected Provision 1. General Me 2. SC/ST/OB 3. Reserved Q	C/Quota	. = •.		- 2. <b></b> y	Rejected Remarks			

Signature of the Director, Institute of Tai Studies

Signature of the Chairmen Admission Committee