



गणित विभाग
DEPARTMENT OF MATHEMATICS
दिल्ली विश्वविद्यालय, दिल्ली-110007
UNIVERSITY OF DELHI, DELHI – 110007

**APPLICATION FORM FOR ADMISSION TO M.Phil PROGRAMME IN
MATHEMATICS FOR 2019-2020**

Affix passport
Size Photograph
Here

1. Name (in block letters).....
2. Father's NameMother's Name.....
3. Local (Delhi) Address.....
Tel. No.....Mob. No.....email_id
4. Permanent Address.....
5. Date of Birth.....Nationality.....Domicile State.....
6. Religion.....GenderMarried/Unmarried.....
7. Delhi University Enrolment No, if any.....
8. Do you belong to SC/ST/OBC/ category? If yes, mention category and attach Caste Certificate.....
9. Do you fall under Physically Handicapped Category? If yes, attach Certificate.....
10. Details of Examinations Passed .

Exam Passed	University/ Institute	Year	Aggregate Marks/Max. Marks	% of Marks	Marks Obtained in Mathematics/Max Marks	Remarks, If any
B.A./B.Sc. Gen./Hon.						
M.A./M.Sc.						
National Level Fellowship						
Any other Exam						

11. Employed to give details of employment and N.O. C. from the employer to pursue full time M.Phil Course
Work.....
12. Do you have any fellowship, if yes mention scheme (attaché copy of
sanction letter)
13. Area of Dissertation 1.
(in order of preference) 2.
3.

14. List of Optional Papers offered in III/IV semester of M.A./M.Sc.

1.		2.	
3.		4.	
5.		6.	
7.		8.	

Note: Please attach self-attested copies of all the Degrees and Mark-sheets

I certify that the contents mentioned above are true to the best of my knowledge and nothing has been concealed. If anything is found incorrect at any stage, my admission may be cancelled.

Undertaking/Declaration:

- (a) I have carefully gone through the rules as prescribed under Ordinance-VI and by the department relating to the Master of Philosophy (M.Phil.) Course and I undertake to abide by them during the tenure of my research in the Department of Mathematics, University of Delhi. I am aware that disputes, if any, arising out of/ or relating to any matter, whatsoever, concerning registration/cancellation/ submission of thesis or any other matter shall be subject to the exclusive jurisdiction of the competent courts in Delhi only.
- (b) I declare that I shall submit myself to the disciplinary jurisdiction of the authorities of the University who may be vested with the powers to exercise discipline under the Act, the Statutes, the Ordinances and the Rules that may be framed by the University/Board from time to time in this behalf.
- (c) I declare that I am not registered for any full-time programme of study in any University / Institution.
- (d) I solemnly declare that I am not in any kind of employment at present and that in case I get any employment at any stage during my studies, I will seek prior approval
- (e) I hereby confirm that before leaving Delhi or leaving for abroad, I will take prior approval of the Head of the Department and on arrival I would immediately inform.

Dated: _____

(Signature of the Candidate)

Remarks by the Head of the Department of Mathematics, University of Delhi

Mr./Ms. _____ is eligible & permitted for admission to M. Phil Course work in Mathematics and Dr. _____ of _____ College/University is appointed his/her Supervisor. The Advisory Committee is as follows:

1.

2.

3.

(Signature of the Supervisor)

(Signature of the H.O. D.)