Proforma for Application

To, Director/Chairperson, PGT-SFC-CELL, I.P.G.T. & R.A. Gujarat Ayurved University Jamnagar – 361 008 (Gujarat), India								
Sub: - Application for admission in the Course.								
1.	Name of the Applicant : (In capital letters)							
2.	Father's Name :							
3.	Permanent Home Address:							
4.	Address for Communication: Ph.No:-			Fax:	Email:			
5.	Nationality		:					
6.	Category		:					
7.	Date of Birth :							
8.	Sex		: N	Male	Female			
9. Educational Qualification:								
Na	me of Exam	Univers	sity	Year of Passing	Subjects	Percentage	Div./Class	
10. Other relevant information:								
11. Details of Application Fee:								
For Foreign students only (column 12-16)								
12. Passport No. :					Issued Form :			
13.	13. Type of Visa : Valid up to :							
14. Expected date of arrival in India :								
15. Expected date of arrival and address in India: (If you are in India)								
16. Whether self supporting or scholarship holder : (Please attach true copies testimonials/proof for 5, 6, 7, 9, 10 and 11)								
I hereby declare that the information given is true. In case I am selected for the course, I shall abide by the rules and regulations of the University applicable to the course trainees/students and also the laws in force in the country binding on foreign nationals.								
Da	te :							
Place:						Signature o	Signature of Applicant	