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Category : Gen/SC/ST/OBC-A
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HONS. PASSED: 2013/2014 PWD YES

## **UNIVERSITY OF CALCUTTA**

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Application Form for Admission to M.A./M.Sc. in Economics										Pass	sport size							
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## **Personal Information of the Applicant**

1. Name of the Applicant		2	Date of Right						
3.(A) Present Address	•	2	2. Date of Birth :						
(B) Telephone No.		Mobile No.							
4.(A) Permanent Address	•	WIODITE NO.							
(B) Telephone No.	•	5. E-mail	6. State :						
7. Nationality		8.Gender	9. Marital Status						
10. Blood Group			3. Iviai itai Status						
·		11. Religion	(C) Monthly Income						
12.(A) Father's Name		(B) Occupation (B) Occupation	(C) Monthly Income						
13.(A) Mother's Name:		(C) Monthly Income							
14.(A) Spouse's Name:		(B) Occupation	(C) Monthly Income						
15.(A) Guardian's Name	(5. )	(B) Occupation	(C) Relationship						
16. Income of the family									
17. Are you enjoying any									
18. Examination Passed	Madhya	mik or 10 Level	Higher Secondary or (10+2) Level						
Year of Passing									
Name of School									
Name of Board									
Percentage of Marks									
Schedule pasted on the Uterms and conditions the programme to which I wagainst reserved categor or distortion of any fact understand that my administration of the Uterstand	hereby declare to knowledge and belie University website/Propersity website/Propersity will be admitted and y. If claimed, to the solike category, educationission if granted or	f. I have read the relevar inted Hard copy/Notice Bo my responsibility, to pro- also, in respect of qualifi atisfaction of the Universi- ional qualifications, nation degree acquired subsequ	ted by me in this Application Form are at Information Brochure & Admission pard for Admission. I shall abide by the we my eligibility for admission to the cations and entitlement for admission ty. Further, in the event of suppression hality, etc. made in Application Form. I gently, is liable for cancellation. I also						
the rules and Regulation			nission will be final and I shall abide by						
Place :	Ci-mat	of Committee	Cianatura of Auglicant						
Date :	Signature	of Guardian	Signature of Applicant						
		<u>Enclosures</u>							
•	payment receipt.								
<ol><li>Self attested tru</li></ol>	e copies of marks-she	eets of all the examination	s passed (10 <sup>th</sup> standard onwards)						
<ol><li>Proof of Date of</li></ol>	Birth								
4. SC/ST/OBC(A)/C	SC/ST/OBC(A)/OBC(B)/PWD Certificate, if applicable								

5. Family Income Certificate