



# INSTITUTE OF ADVANCED RESEARCH GANDHINAGAR

(Established under the Gujarat Private Universities Amendment Act, 2011)

## Application Form

Registration No

Inquiry No

(To be filled by University)

Photograph

Signature

### 1. Course Selection

|              |  |
|--------------|--|
| Degree       |  |
| Course Major |  |

### 2. Personal Details

Full Name

Gender  Date of Birth

Postal Address  Pin Code:-

Permanent Address  Pin Code:-

Email ID

Contact No  Nationality  Religion

Category  General  SC  ST  OBC  Other

### 3. Qualification Details (Attach/ Upload Relevant Document hard copy of certificates)

| Name of Courses | Name of University/ Institute | Subject/ Stream | Year of Passing | Total Aggregate/ Grade | Division Class & Percentage |
|-----------------|-------------------------------|-----------------|-----------------|------------------------|-----------------------------|
| S.S.C           |                               |                 |                 |                        |                             |
| H.S.C           |                               |                 |                 |                        |                             |
| Under Graduate  |                               |                 |                 |                        |                             |
| Post Graduate   |                               |                 |                 |                        |                             |

**4. Languages Known**

|  |
|--|
|  |
|--|

**5. Sports/ Extracurricular Activities (Interested in)**

|  |
|--|
|  |
|--|

**6. Family Details**

|                  | Father | Mother | Guardian /Husband |
|------------------|--------|--------|-------------------|
| Full Name        |        |        |                   |
| Profession       |        |        |                   |
| Qualification    |        |        |                   |
| Address (Office) |        |        |                   |
| Email ID         |        |        |                   |
| Contact No.      |        |        |                   |

**7. Application Fee (Cash/ DD/ Online)**

| DD Amount | DD No | DD Date | Bank Name |
|-----------|-------|---------|-----------|
| Rs.500    |       |         |           |

**8. Declaration.**

[ ] I have read all the terms and condition for admission and I do agree to all there in.

Signature of Applicant

Date:

Hard copy of application form should be sent along with online payment receipt or demand draft of Rs.500/- in favor of "The Registrar University of IAR".

POSTAL ADDRESS

**INSTITUTE OF ADVANCED RESEARCH**

Institutional Area, koba, Gandhinagar-382426 (Gujarat) | **Phone:** 079-30514163, 30514100

**Web-site:** www.iar.ac.in | **E-mail:** admissions@iar.ac.in

**List of Document/ Certificate need to attach/ Upload (As Applicable)**

- ❖ S.S.C. Mark Sheet
- ❖ School Leaving Certificate
- ❖ Two Passport Size Photos
- ❖ Post Graduate Degree Certificate
- ❖ H.S.C. Mark Sheet
- ❖ Aadhar Card (Unique Identity Card)
- ❖ Under Graduate Degree Certificate
- ❖ Caste Certificate (Optional)