### **INSTITUTE OF MATHEMATICS AND APPLICATIONS**

(Science & Technology Department, Govt. of Odisha) Andharua, Bhubaneswar-751029

## **APPLICATION FORM FOR ADMISSION INTO PG COURSES**

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			Refere	ence N	umber						Paste your recent
2	0	2	5	PG							passport size photo graph (Color) and
			For O	ffice us	se only	,					append your full signature
INSTRUCTION: Fill in the application form in your own handwriting clearly and legibly. Incomplete and duplicate forms											
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Date of	f Transa	action									
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(Please leave one blank between two words)

Name of the Applicant: (In capital letters)										
Father's Name:										
Mother's Name:										
Category: (Tick whichever is applicable)	GENERAL	ST						SC		
Whether Persons W	ith Disability (PWD) (Wr	rite YES/NO in th	he Bo	ox):						
6. Date of Birth (As recorded in the High School Certificate):						М	Y	Y	Y	Y
Email ID:										
	(Please w	rite your valid e	email	ID)						
Mobile No:										
	(Please writ	te your valid mo	bile	num	ber)					
Aadhaar Number:										
A.1.1			adha	ıar n	umb	er)				
Address for Corresp	ondence (In capital letter	rs):								
	Applicant: (In capital letters) Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons W  Date of Birth (As recommended in the second i	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons With Disability (PWD) (Wr. Date of Birth (As recorded in the High School Email ID:  (Please w. Mobile No:  (Please w. (	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons With Disability (PWD) (Write YES/NO in the High School Certificate):  Email ID:  (Please write your valid of Mobile No:  (Please write your valid mode)  Aadhaar Number:	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons With Disability (PWD) (Write YES/NO in the Bound of Birth (As recorded in the High School Certificate):  Email ID:  (Please write your valid email Mobile No:  (Please write your valid mobile in the High School Certificate):  (Please write your valid Aadhar Number:	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons With Disability (PWD) (Write YES/NO in the Box):  Date of Birth (As recorded in the High School Certificate):  Email ID: (Please write your valid email ID)  Mobile No: (Please write your valid mobile num  Aadhaar Number: (Please write your valid Aadhaar n	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: GENERAL ST stapplicable)  Whether Persons With Disability (PWD) (Write YES/NO in the Box):  Date of Birth (As recorded in the High School Certificate):  Email ID: (Please write your valid email ID)  Mobile No: (Please write your valid mobile number)  Aadhaar Number: (Please write your valid Aadhaar numb	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons With Disability (PWD) (Write YES/NO in the Box):  Date of Birth (As recorded in the High School Certificate):  Email ID:  (Please write your valid email ID)  Mobile No:  (Please write your valid mobile number)  Aadhaar Number:  (Please write your valid Aadhaar number)	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons With Disability (PWD) (Write YES/NO in the Box):  Date of Birth (As recorded in the High School Certificate):  Email ID: (Please write your valid email ID)  Mobile No: (Please write your valid mobile number)  Aadhaar Number: (Please write your valid Aadhaar number)	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: (Tick whichever is applicable)  Whether Persons With Disability (PWD) (Write YES/NO in the Box):  Date of Birth (As recorded in the High School Certificate):  Email ID: (Please write your valid email ID)  Mobile No: (Please write your valid mobile number)  Aadhaar Number: (Please write your valid Aadhaar number)	Applicant: (In capital letters)  Father's Name:  Mother's Name:  Category: GENERAL ST SC SC Sapplicable)  Whether Persons With Disability (PWD) (Write YES/NO in the Box):  Date of Birth (As recorded in the High School Certificate):  Email ID: (Please write your valid email ID)  Mobile No: (Please write your valid mobile number)  Aadhaar Number: (Please write your valid Aadhaar number)

12. Mother Tongue:				
13. Gender:				
14. Religion:				
15. Marital status:				
[				
16. Nationality:				
	FDIICAT	IONAL RECOR	D	

#### 17. Education details:

Name of the	Board/	Name of the	Year of	Stream	Division/	% of	% of Marks
Examination	University	College/Institution	passing		Grade	Marks/	in
						CGPA	Mathematics
Matriculation/							
High School							
Certificate							
Examination or							
equivalent							
Higher							
Secondary/							
Equivalent							

Examination									
Bachelor's degree/ Equivalent degree examination.									
Others, if any									
18. Name	e of the Institutio	n where last studied :							
19. Name	19. Name of the Board/ University where last studied:								
		OTHER I	NFORMAT	ION					
20. Occu	oation/Designati	on of Mother		Fa	ther				
21. Total annual income of the household (gross):									
		22. Details of contact person in case of emergency							
22. Detai	ls of contact pers	son in case of emerger	ncy						
22. Detai Name		son in case of emerger							
Name Addr	ess								
Name Addr	ess								

### DECLARATION

	I certify	that	the	in formation	furnished	in	this	application	is	true	to	the	best	of	my
knowle	dge. My a	applica	tion	may be rejec	cted and ad	mis	ssion	be cancelled	, if	any ii	nfor	mat	ion he	erei	n is
found to	be inco	rrect a	t any	y time even a	fter admiss	ion	١.								

PLACE:	SIGNATURE OF APPLICANT
DATE:	(Full Signature)
	(CHECK LIST OF DOCUMENTS)  *****

[Please put a tick mark in the appropriate box]

1.	Photo copy (self-attested) of High School certificate:	
2.	Photo copy (self-attested) of High School Mark sheet:	
3.	Photo copy (self-attested) of Intermediate /Higher Secondary certificate:	
4.	Photo copy (self-attested) of Intermediate /Higher Secondary Mark sheet:	
5.	Photo copy (self-attested) of Graduation certificate:	
6.	Photo copy (self-attested) of Graduation Mark sheet:	
7.	Photo copy (self-attested) of the valid caste certificate (If belong to ST/SC candidates of Odisha state domicile.):	
8.	Photo copy (self-attested) of the valid certificate (If belong to Persons With Disability (PWD) ):	
9.	Photocopy of details of application fee:	
10.	Two self-addressed envelopes:	
11.	Two recent passport size photograph:	

(in words)	 paged from	to
PLACE: DATE:		OF APPLICANT Signature)

Total Number of document pages submitted: (in figure)

# (FOR OFFICE USE ONLY)

Mr. / Ms	
ACADEMIC SECTION I/C	ADMISSION IN-CHARGE
ADMISSION AND COURSE FEI	E PAYMENT DETAILS
Amount Paid	
Transaction ID/Demand Draft Number	
Date of Transaction /Date of Demand Draft	
Issuing Bank Name	
Money Receipt No. and Date	
ACCOUNTS SECTION I/C	DIRECTOR