I.

Indicate (✓)

# RANCHI UNIVERSITY, RANCHI

# APPLICATION FORM FOR M.Phil./Ph.D. ENTRANCE EXAMINATION - 2024 Session: 2024-2026

For

### **RANCHI INSTITUTE OF NEURO-PSYCHIATRY & ALLIED SCIENCES (RINPAS)**

(The form must be filled carefully incomplete form is liable to be rejected)

	Cou	Course in which applicant sought admission though entrance examination									
	a)	Ph.D. in C	Clinical Psychology			b)	Ph.D. in Psychiat	ric Social W	ork		
	c)	M.Phil. ir	Clinical Psychology			d)	M.Phil. in Psychi	atric Social \	Work		
1.	Name (IN BLOCK LETTER) Shri/Smt./Kumari (✓) :									Calfathantad	
2.	Date of Birth			:						Self attested Passport Size Photograph	
3.	Fat	Father's / Husband's Name :									
4.	Address for correspondence with PIN Code No. : Telephone No. and E-mail ID, if any										
5.	(If y		nging to Scheduled C e attested copy of th								
6.	Par	Particulars of Educational Qualifications:									
	_	mination assed	School/College/ University		Sul	bject	s offered	Division/ Class	% of Marks	Year of Passing	
	B.A./E B.Com	-									

Note: Enclose attested copies of Mark sheets.

M.A./M.Sc./ M.Com.

M.Phil.

7.	Particulars of Demand Draft (attach original copy)								
	Demand Draft No	Date	Amount Rs						
	Drawee Bank		Payable at Ranchi.						
8.	Please state whether you have already registere If yes, please write Registration Number and year								
9.	Present occupation with details of employment:	·							
10.	List of Enclosures (The copies must be self-attest	ted):							
	(i)	(vi)							
	(ii)	(vii)							
	(iii)	(viii)							
	(iv)	(ix)							
	(v)	(x)							
Dec	claration:								
	I hereby declare that the particulars furnishef. I am aware that any incorrect information may he rules and regulations of Ranchi University.	•	me are correct to the best of my knowledge and to cancellation of registration. I promise to abide						
Plac	e:								
Dat	e:		(Signature of the Candidate)						

Important: Please enclose self-addressed 10" X 4" envelope. Copy of the Bank Challan/Photocopy of Bank Draft must be retained.

# RANCHI UNIVERSITY, RANCHI

## M.Phil./Ph.D. ENTRANCE EXAMINATION - 2024

Session: 2024-2026

For

### **RANCHI INSTITUTE OF NEURO-PSYCHIATRY & ALLIED SCIENCES (RINPAS)**

## **Admit Card**

### To be filled up by the candidate

Name (IN BLOCK LETTER) State Shri/Smt./Kumari	:								
Date of Birth	:		Self attested Passport Size Photograph						
Father's / Husband's Name	: .		rnotograpn						
Address for correspondence with PIN Code No. Telephone No. and E-mail ID,	: .								
if any									
Course in which applicant sought admission	:								
For office use only									
1.) Examination Roll Nu	mbe	er							
2.) Date of Examination									
3.) Place of Examination	1								

Signature of Assistant

Signature of the Controller of Examinations Ranchi University, Ranchi