

Basic Bio-statistics training
for students pursuing MD/ MS (Ay.) / Ph.D (Ay.)

Application Form

- 1) **Full Name of the student (IN BLOCK LETTERS)**

- 2) **Fathers / Husband's Name** _____
- 3) **Date of Birth (DD/MM/YYYY)** _____
- 4) **Age (in completed years)** _____
- 5) **Gender** _____
- 6) **E-mail id of the student** _____
- 7) **E-mail id of the Guide** _____
- 8) **Mobile Number of the student** _____
- 9) **Educational Qualification** _____
- 10) **Year of admission in MD / MS / Ph.D** _____
- 11) **Name of the Ayurveda College where student is pursuing MD/ MS**

- 12) **Title of the thesis:** _____

Please enclose one page of CV and self attested copy of the Aadhar along with this application form

I
understand that the information provided by me is correct to be best of my knowledge and I have not concealed any relevant information. If the information provide by me is false / inaccurate at any stage, my candidature for the training programme can be cancelled.

Signature of the student

Signature of the Guide

Name of the Guide