

## SURABHARATI SANGEET PARISHAD

AN INTERNATIONAL EXAMINATION BOARD & UNIVERSITY OF ART & CULTURE

Registered under W.B. Societies Registration Act of XXVI of 1961 Recognised by:

VARIOUS STATE GOVTS., UNIVERSITIES & EDUCATION BOARDS 3/C, Darpa Narayan Tagore Street, Kolkata-700 006.

WhatsApp- 9433465214 / Mob. - 9903086256

	E-mail : surabharatisangeetparishad@yahool.com surabharatisangeetparishad@gmail.com Website : www.surabharatisangeetparishad.org						
Δ	APPLICATION FORM FOR REGISTRATION			CO CONTRACTOR		CASS (10 2 )	RESEARCH
1.	Name in full (State Mr./Miss/Mrs.)	:	TTTTTT		Dimosi	, , , , , , , , , , , , , , , , , , , ,	KESEMKON
2.	Full Address with Phone No. / WhatsApp No. (Any change of Postal Address should be communicated to the office at once)	:					рното
3.	Name of Parents :						
4.	Subject and title of proposed research (Four copies of synopsis be enclosed)	:					
5.	Name, Address and Present Occupation of the Guide	:					
6.	Present Occupation of the Applicant	:					
7.	Applicant's Present Age	:					
8.	Details about papers Publications etc. if any prepared by the applicant or prepared jointly with any other author	:					
9.	Whether the Applicant registered his/her name in any University on a similar subject before, if so, details may be given	:					
10.	Whether the Applicant applied for Registration in the University any time before, if so, details must be given	1					
11.	Details of all the Examinations passed by the candidate; Names of the Examination, School/College/University wherefrom the candidate passed the Examination, Year of passing, Division/ Class/Scholarship/Prize/Medal obtained must be mentioned.	:					
12.	University wherefrom the candidate obtained, his/her last Degree (Details must be given)	:					
13.	Attested Copies of all testimonials must be submitted along with the application	:					

Signature of the Applicant