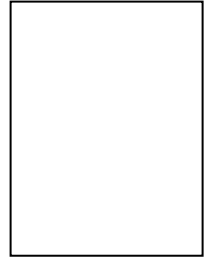


**GANDHI BHAWAN
UNIVERSITY OF DELHI**

**YOGA TRAINING PROGRAMME
APPLICATION FORM FOR ADMISSION**



1. Name:
2. Mother's Name:
3. Father's Name:
4. Date of Birth:
5. Nationality:
6. Sex:
7. Educational Qualification:
8. Permanent Address:
9. Local Address:
10. Phone:
11. E-mail:

Declaration by the Applicant:

I declare that the statements made in the Application Form are true to the best of my knowledge and belief.

I recognize the sanctity of Gandhi Bhawan and will respect the need to maintain calm and dignity. I will participate in all the programs organized by Gandhi Bhawan.

Date:

Signature of the Applicant

Approved by

Director, Gandhi Bhawan

Note: Submit the form along with Photo ID card and Health Fitness Certificate

For office use only

Roll No.

Session: