# Sardar Patel University, Mandi (H. P.)



(A State Government University)



#### DEPARTMENT OF BOTANY

Ref. No.: SPU/BOT/2024- Date: 16.08.2024

### Open Call for Admission in M.Sc. Botany Programme

An open round of counseling for admission in M.Sc. Botany Programme will held on 20/08/2024 (Tuesday) at 10:00 AM to 02:00 PM at the Department of Botany, 3<sup>rd</sup> Floor, Swami Vivekanand Bhawan, Sardar Patel University, Mandi (H. P.) in order to fill **TWO (02)** vacant **NON-SUBSIDIZED** seats. The interested candidates have to fill in the Admission Form (attached along with this notice) and pay the requisite counseling fee (Rs. 700/- in case of GEN category, Rs. 350/- for SC/ ST/ IRDP/ EWS/ PWD category) on the day of counseling. The admission will be based on merit of qualifying examination (B.Sc.).

## Important instructions for candidates:

- 1. The candidates have to attend the counseling strictly as per the date, time and venue mentioned above. The final list of eligible candidates for admission shall be prepared only out of those candidates who attend the counseling.
- 2. The candidates are required to bring with them Original as well as one set of photocopies of the following documents: Matriculation certificate, 10+2 certificate, Graduation certificates of 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> year, Category certificate/ IRDP/ EWS/ PWD Certificate, any other certificate (if applicable), Bonafide Himachali certificate, Character Certificate and two Passport size photographs.
- 3. The fees for non-subsidized seats is Rs. 84030/- per annum (for general candidates) and Rs. 83630/- per annum (for IRDP/ BPL candidates).
- 4. The selected candidates have to deposit full semester fee (Rs. 42015/-) within two days after the display of merit list. The fee can be deposited through ONLINE MODE or CHEQUE in favour of FINANCE OFFICER SPU, MANDI, HP in the SBI Account No. 39825240539, IFSC code SBIN0010326.

Head

Department of Botany

S. P. U., Mandi (H. P.)



# Sardar Patel University, Mandi (H.P.)



### (A State Government University) Admission Form

Name o	of the progran	ıme:					
1. Full Name (B	lock Letters):		·				
2. (i) Father's N						La	test photograph
		· 					
3. (i) Gender : N	Male /Female /	Γrans Gender:_			·		
(ii) Category (	Attached certi	ficate): Gen		SC	ST	Other	, 
(iii) Date of B	irth (DD/MM/	YYYY):					
(iv) Age:	Years:	Months:					
4. Correspond	lence Address:	98 v.,					-
	·	,		427.4			
5. Permanent							
6. Contact De	tails: Phone No	o (with STD Co	odes):			_Mobile +	-91:
7. E-mail id:_							
8. Educationa	l Qualification	s:					
Exam.	Subjects	Bo Ur	ard/ niversity	Year of Passing	Division / Class	% age/	Remarks
10 <sup>th</sup>			21				
10+2							
Graduation							
Other							

### **Declaration by the Candidate**

I hereby declare that the entries made by me above are correct to the best of my knowledge. I am conscious that if any of the entries are found to be incorrect, my admission is liable to be cancelled. I hereby solemnly affirm that I will not indulge in any kind of ragging/indiscipline and if I am found guilty of any offence, I will have no claim against the order of the rustication/expulsion/cancellation of my admission from the University. I further undertake that in the event of my ineligibility at the time of counseling/admission, I shall have no claim for admission and as such my candidature is liable to be cancelled for which I am solely responsible.

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Signature of the Candidate

#### FOR OFFICE USE ONLY

Received on	Complete (Yes/No)	Remarks		
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