## **GANDHI BHAWAN UNIVERSITY OF DELHI** YOGA & MEDITATION TRAINING PROGRAMME

## **APPLICATION FORM FOR ADMISSION**

Attach a passport size photograph

## **SEPTEMBER 2021 BATCH**

(IN CAPITAL LETTERS)

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	Name:			
2.	Mother's Name:			
3.	Father's Name:			
4.	Date of Birth:			
5.	Nationality:			
6.	Sex:			
7.	Educational Qualification:			
	Course	Board/ University	College	Year of passing
8	Yogic qualification:			
	. Permanent Address:			
10.Local Address:				
11. Phone: E-mail (in capital letters)				
<b>Declaration by the Applicant:</b> 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. I shall be expelled from the course if I found misbehaving with my faculty, classmates and staff of Gandhi Bhawan at any time.				
Note: No leave is permissible during the course				
Date:			Sig	nature of Applicant
Approved by:				
Director, Gandhi Bhawan				
<ul> <li>Note: Submit the following (scan copies including application form)</li> <li>Proof of Date of Birth</li> <li>Photo ID card (Aadhar/ Voter id)</li> <li>Health Fitness Certificate from certified medical practitioner</li> <li>Send application to: Male candidates can mail to: yogacoursegbdumale@gmail.com</li> <li>Female candidates can mail to: yogacoursegbdufemale@gmail.com</li> </ul>				

For office use only: \_\_\_\_\_ Roll No. Session: SEPTEMBER 2021