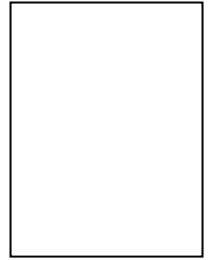


**GANDHI BHAWAN
UNIVERSITY OF DELHI**

**YOGA & MEDITATION TRAINING PROGRAMME
APPLICATION FORM FOR ADMISSION**

JANUARY/ FEBRUARY 2020 BATCH – VII

(IN CAPITAL LETTERS)



1. **Name:**
2. **Mother's Name:**
3. **Father's Name:**
4. **Date of Birth:**
5. **Nationality:**
6. **Sex:**
7. **Educational Qualification:**

Course	Board/ University	College/ Institution	Year of Passing

8. **Any Yogic Qualification:**
9. **Permanent Address:**
10. **Local Address:**
11. **Phone:** **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: **BATCH VII – JAN/FEB 2020**