



Application Form No.

Roll No._____ (To be filled by Office)

University Enrolment No. ______ (If the candidatehas earlier passed and/or was admitted to anycourse atthe University of Delhi)

Amar Jyoti Institute of Physiotherapy (UNIVERSITY OF DELHI) Bachelor of Physiotherapy 2024-25

NOTES: 1. THE APPLICATION FORM SHOULD BE SUBMITTED BY AUGUST 10, 2024 (Gen/SC/ST/OBC-NC/OH)

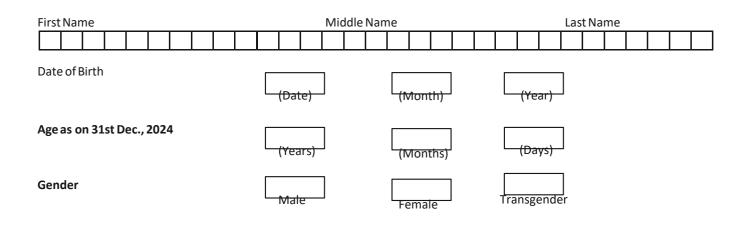
2. APPLICATION UNDER NRI SPONSORED CATEGORY CAN BE SUBMITTED UNTIL SEATS ARE FILLED

APPLICATION FORM

(USE CAPITAL LETTERS ONLY)

Attach your Photograph here

Personal Information



Father's/Guardian's Name Mother's Name **Correspondence Details** Complete Local Postal Address along with Pincode _ with Div ad

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Kindly Note: Allcommunication will bedone with primary email Id (Avoid cursive writing)

Academic Details

(Please encloseself attested copies of testimonials only. Originals to be produced at the time of counselling.)

Examination	Yearof	Passing		Board/Un	iversity		Marks Obtained	Max. Marks
10th Class								
12th Class								
Subject-wise	Marks	in	12th	(10+2)	Senior	Secon	dary/Qualifying	Examination
In case 12th class read passed the final (12t							mit the documentary	evidence of having

Subject	Marks Obtained	Max. Marks	Grade(Ifany)
Physics			
Chemistry			
Biology			
English			
*			

* Candidate should select 5th best subject if any and fill the blank row

Incase of Result Awaited : Name of Board ______ Roll No. ______

Aggregate Percentage	12th (Best of 5)	PCBE