

VP Gurukulam for Vedic Sciences

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Affiliated to

Yoga Samskrutham University, Florida, USA

APPLICATION FORM Passport Size **COURSE VEDANGA JYOTISHA (JYOTHIR YOGA)** Photo 1 + 2DVJ **MAVJ PhDVJ** M.A + PhDVJ1. Name of the Candidate in full: 2. Name of the Father/Husband: 3. Date of Birth: 4. Permanent Residential Address: PIN CODE 5. Address for communication: Mobile No: E-Mail 6. Religion and Nationality: 7. Educational Qualifications: (General): S.No. **Examination Passed** Year of Passing Grade / % Marks

5.	Others Qua	illication / Awards / Acine	/emen	ts in vedanga Jyotisna (attac	ii docume	ints)	
	S.No. Name of the Course		Institution			Year & Grade	
). Pr	esent Occup	oation:					
				as Teacher /Guide/Consulta			
	S.No.	S.No. Name of the Institut		Designation		Working Since	
1. I	Reasons for l	Learning:			•••••		
2. Details of Remittance of Course Fees:			Account details for Online Transfer, Screenshot of payment should be shared with transaction details VIJAYALAKSHMI R, Ac. No: 50100140270256 IFSC: HDFC0001755 100 Feet road,Indira nagar Bangalore Google Pay: 9442254502				
	•			hed above is true. I confirm and abide by the rules and r	~ ~	•	
Plac	e:						
Date: Notes:			Signature of the Candidate				
by Properties Properties Properties Interpretation	Application form duly completed in all respects should be forwarded to the Registered office of the Institute or Main Study Centres chose by the Candidate. Passport Size Photographs to be affixed on the application and signed across by the Candidate. Proof of Age & Address should be furnished (Passport / Driving License / Telephone bill). Photocopies of the Certificates as regards qualifications duly attested shall accompany the application. Registration to any of the Courses cannot be claimed as a matter of right and the University reserves the rights of admission/acceptance. In the case of candidates applying for PhD, furnish details of topics selected and the of Guide for approval by the University. Please use separate sheet as enclosure for providing additional information if any.						
Plac	e:						
Date	e:			Seal & Signature of	the Institu	ıte Head	