	Roll No.							Form No.	
	UNIVERSITY OF DELHI Univ. Emblem DEPARTMENT OF OPERATIONAL RESEARCH Application Form for Common Entrance Test M.Sc. OPERATIONAL RESEARCH M.A./ M.Sc. APPLIED OPERATIONAL RESEARCH (Academic Session 2011-2012) Name (Ms./Mr.)						e Test H ESEARCH	Attested Photograp	sh
	(in Block letters) Date of Birth								
	Category(SC/ST/OB					U C			
	Father's Name		Mother's	Name			•••••		
	Address for Commun (in Block letters)	nication	•••••				•••••		
	Pin Code	Telephone No	•••••	•••••	Mobile No.				
ſ	Exam. Passed	Board/University	Year	Roll No.	Max. Marks	Marks Obtained	% of mark aggregate	s in Subjects	Offered
-	Class X Class XII								
_	Bachelor's degree*								
	Master's degree* * Please specify								
). : (Issue	ed earlier	by Universi	ty of Delhi, i	if the candidate h	ad earlier pa	ssed any course from	Delhi University)
	Courses Offered : M.Sc. (OR) M.A./M.Sc. (AOR) Both								
	Documents Required : 1. Attested copy of class Xth certificate.								
	 Attested copies of n alongwith a certifica One self-addressedd Attested copy of SC DECLARATIONS I have passed/appea I have carefully rea 	year, II year marks shi narks sheets for Post-g ate stating list of paper & stamped (worth Rs. //ST/OBC/CW/PH cer red in the eligibility ey ad the M.Sc. (OR) and	eet & Fina raduate de s appeared 12/- for lo tificate dul xamination l M.A./M.	l year Admit gree, or if res l. cal area & R ly attested, w l. SC. (AOR) a	sult not decla s. 25/- for fa herever requ admission el	ared, attested copy r-flung areas) envo ired.	of Part-I mar	ificate stating list of pap ks sheet & Final year A 9" x 4". derstand that my candid	dmit Card
	liable to be cancelled if I am not found eligible for admission at any stage. Date Signature of the Candidate								
	Roll No. M.Sc. (OR) and/or M.A./ M.Sc. (AOR)							Form No.	
	Name of the Candida	Candidate :						Drm INO.	
	Father's Name	:			•••••				
	Address :							Photograph	
	Signature of the Can								
	: June 19, 2011 Time : 9:30 A.M. Fime : 1:00 P.M.		ADMISSION TICKET FOR M.Sc. (OR) and/or M.A./ M.Sc. (AOR)						
	ROLL No. Name of the Candidate :							Photograph	
	Father's Name	:		•••••	•••••			- monoPraku	
	Address		y in the Ex	amination H		wed after 10:00 A	.M.		
	Signature of the Can	didate	Examinat	tion Centre		Head			