

**DOCTOR HARISINGH GOUR VISHWA VIDYALAYA, SAGAR**  
**SAGAR – 470 003 (M P), INDIA**  
(A Central University) ([www.dhsgsu.ac.in](http://www.dhsgsu.ac.in))

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**Community College**  
**Admission Form**  
**One Year Diploma Course in Mushroom Cultivation**

Name :.....

Mother/Father/Husband Name :.....

Date of Birth :.....

Gender (Male/ Female) :.....

Marital Status (Married/ Un-Married) :.....

Category( SC/ST/OBC/GEN) :.....

Permanent Address : .....

Address for Correspondence: .....

Email:..... Phone No.:.....

Educational Qualifications:

affix
passport
size
photo

Degree	Year	Board	% percentage	Division
10 <sup>th</sup>				
12 <sup>th</sup>				

Note: Please attach all the necessary documents/certificates in support of educational qualifications and category.

**DECLARATION**

I .....hereby declare that the details mentioned above relate to me only and are true to the best of my knowledge and belief.

Place:

**Signature**

Date:

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Note: Duly filled application form along-with all required documents must be submitted to “The Coordinator-Community College”, Deptt. of Sociology, Dr. H. S. Gour Vishwavidyalaya, Sagar (MP)