Application No.

Dr. Y.S.R.HORTICULTURAL UNIVERSITY

ADMN. OFFICE: VENKATARAMANNAGUDEM
TADEPALLIGUDEM-534 101 , WEST GODAVARI DISTRICT
ANDHRA PRADESH

Photograph

Application for Admission into M.Sc.(Hort.)/M.Sc., Courses – 2025-26

Major Field of study to which admission is sought :

1. Name of the P.G. Course (Subject/Discipline) **:**

2. Full Name of the Applicant in Block Letters **:**
   (as indicated in Provisional Degree Certificate of B.Sc.(Hort.) / B.Sc.(Hons.) (Horticulture) / B.Sc.(Agriculture) / Other Discipline

   Father's Name **:**

   Mother's Name **:**

   Guardian's Name and Relationship **:**

3. Date of Birth (Age as on 1st July, 2025) **:**

4. Place of Birth **:**

   Mandal **:**

   District **:**

5. Nationality **:**

6. Social Status (OC/BC/SC/ST) **:**
   (Indicate Group & Caste)
   (Enclose attested xerox copy of certificate)
   If belongs to BC/ SC/ST)

7. Eligibility under EWS Quota **:** Yes / No
   (if Yes, enclose attested xerox copy)

8. State if Differently abled **:** Yes / No
   (if yes, enclose attested xerox copy)

9. Aadhaar Card No. **:**
   (Enclose xerox copy of Aadhaar Card)

10. (a) Postal Address

Permanent Address (in CAPITALS)	Present Mailing Address (in CAPITALS)

(b) Mobile No. :

(c) E-mail ID :

11. Details of ICAR AIEEA (PG)-2025

a) Department/Subject/Discipline appeared for :

i) Application No. of AIEEA :

ii) Rank obtained in AIEEA :

iii) Total marks scored :

12. **Academic Qualifications (Enclose Attested Copies of Marks/Grade sheet/Certificates)**

Examination	**Name of the**		**Year of Passing**	**Marks (%) / OGPA**
	Institution/College	**Board/University**		
S.S.C (10th Class)				
Intermediate (10+2)				
B.Sc.(Hort.) / B.Sc.(Hons.) (Horticulture) / B.Sc.(Agriculture) / Other Discipline with 4 Years Duration				

Note: If the applicant does not study the aforesaid courses in whole or any part in seven consecutive years in any Educational Institution for reasons other than failure please furnish the Residential Certificate for that period in the prescribed form in the annexure.

13. **Particulars of Education in Andhra Pradesh** (For Determining Local Area – Attested Copies of Study Certificates from Head(s) of recognized institution(s) should be enclosed as proof).

Class	Academic Year	Name of the Institution & Address	District & State
VI			
VII			
VIII			
IX			
SSC			
Inter Junior			
Inter Senior			

14. Candidates who do not belong to categories mentioned in column No.12 & 13 above, should furnish the following information duly supported by relevant certificates.

    a) Period of residence of the candidate in A.P. State excluding the period of study outside the State

    OR

    b) Period of residence of the parents of the candidate in A.P. State excluding the period of employment outside the A.P. State.

    Note: For a & b categories minimum residential requirement is 10 years. Certificate from the Tahsildar/Mandal Revenue Officer clearly indicating the period of residence should be enclosed. Nativity certificate without period of residence shall not be considered.

Declaration

15. I promise to abide by the rules/regulations and the orders of the University, its authorities and officers. I do hereby declare that the information furnished in this application is true to the best of my knowledge and belief. I am aware that in the event of any information being found to be false or untrue or if I indulge in ragging / misbehave with other students/teachers /staff of the University, I shall be liable to such action by the University as it may deem proper apart from penal action under Law.

Date: . . . . . Signature of the Candidate

I agree to the applicant's admission to M.Sc course in one of the colleges of Dr.Y.S.R. Horticultural University. I shall be responsible for His/Her Conduct and Behaviour during the period of College Career and also for the payment of all Fees and other Charges.

Date: . . . . . **Signature of the Father / Guardian**

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ANDHRA PRADESH.

Summary Sheet of Application for Admission into M.Sc.(Hort.)/ M.Sc., Courses - 2025-26
(To be filled in by the Applicant)

1. Name of the Course (Subject / Discipline) :

2. Name (in Block Letters) :

3. Address for Communication :
   (in Capital Letters with PIN Code)
   E-mail:

4. Mobile Number :

5. University Area (AU/SVU/NL) :

6. Course Studied at B.Sc. level :
   (4 Years Duration)
   B.Sc.(Hort.) / B.Sc.(Hons.) (Horticulture) / B.Sc.(Agriculture) / Other Discipline
   (Please (√) whichever is applicable)

7. Social Status :
   (OC/BC/SC/ST - indicate group/caste)

8. Eligibility under EWS Category : Yes / No
   (If yes, enclose certificate)

9. Aadhaar Card No. :

10. State if differently abled : Yes / No (if Yes, Enclose Certificate)

11. Age as on 1st July, 2025 :
    (Enclose S.S.C. certificate)

12. State (Yes/No) whether xerox copies of the following Certificates have been enclosed
    (1) Provisional/Degree Certificate of : Yes /No
    B.Sc.(Hort.) / B.Sc.(Hons.) (Horticulture) / B.Sc.(Agriculture) / Other Discipline

    (2) Marks Sheet/ Consolidated Marks Memo/ OGPA Sheet of eighth semester

    (a) B.Sc.(Hort.) / B.Sc.(Hons.) (Horticulture) / B.Sc.(Agriculture) / Other Discipline : Yes / No

    (b) Intermediate Examination : Yes / No

    (c) S.S.C. Examination : Yes / No

    (3) Study Certificates : Yes / No
    (6th class to Intermediate)

(4) Social Status Certificate issued by the Competent Authority : Yes / No

(5) EWS Certificate issued by the Competent Authority : Yes / No

(6) Differently abled Certificate : Yes / No

(7) ICAR Rank Sheet : Yes / No

(8) Department appeared for :

13. D.D. Particulars :

Name of the Bank & Branch	**D.D.No. & Date:**	**Amount**

For Office Use Only

Remarks:

Application Complete / Incomplete / Rejected.

CHECKED BY:

Superintendent	**Deputy Registrar (Acad.& Research)**	**T.O. to Dean of Horticulture**