



APPLICATION FORM NO. _____

**BHAIKAKA CENTRE FOR HUMAN SETTLEMENTS
ARVINDBHAI PATELINSTITUTE OF ENVIRONMENTAL DESIGN**

Near Bhaikaka Library, Vallabh Vidyanagar-388 120

Phone : (02692) 235179 Fax : (02692) 237586

Email : directorapied@hotmail.com Web Site : apied.edu.in

**APPLICATION FOR ADMISSION TO FIRST SEMESTER OF TWO YEAR
MASTER OF URBAN PLANNING PROGRAMME - 2011**

(Affiliated to S.P. University, Vallabh Vidyanagar and recognised by Institute of Town Planers, India, New Delhi)

NOTE :

- Application form should be filled by the applicant in his / her own handwriting.
- Late submission of Application Form / Certificates will not be accepted.
- Applicants shall have to produce originals at the time of Interview

*Affix your
Recent
Passport size
Photograph*

Name of the student in block letters
(Beginning with surname) _____

Date of Birth _____ Place of Birth _____

Nationality _____ Male / Female _____

Permanent Address for Communication _____

(Fax No. & E-mail address, if any) _____

Ph.No _____ Mobile No.. _____

Local Address for Communication or
Address for Emergency _____

Ph.No _____ Mobile No.. _____

Parents Occupation _____

Any other _____

APPLICATION FORM FEES : Rs.200=00

APPLICATION FORM NO. _____

**BHAIKAKA CENTRE FOR HUMAN SETTLEMENTS
A.P.E.D., VALLABH VIDYANAGAR
IDENTITY CARD / ACKNOWLEDGEMENT**

1. Name of Applicant : _____
(Surname first)

2. Present Address for : _____
Communication _____

*Affix your
Recent
Passport size
Photograph*

Date : _____

For Administrative Officer

EDUCATIONAL DETAILS:

Examination	Examination Body/ University	Year of Passing	% of Marks	Class Obtain
H.S.C.				
Degree / Diploma B.Tech. (Planning). B.E. (Civil), (Env. Engineering) Bachelor of Architecture or equivalent, B.E. Water Management, B.E. Construction Technology, M.Sc. / M.A. in Geography, Economics, Sociology, Master of Valuation (Real Estate), B.E. Transportation with aggregate 50% Marks from recognised University.				
Any other				

I have carefully gone through the Bulletin of the Institute and shall be responsible for the conduct of my son/daughter during his / her study in the Institute.

I also undertake to pay regularly all his / her fees, dues including expenses of site visits, educational tours, etc as required by the academic programme.

Signature of Parent / Guardian

Signature of Applicant

Place : _____

Date : _____

16 / 5 / 11

Issue application form

30 / 7 / 11

Last date for submission of Application Form

06 / 8 / 11

Personal Interview

16 / 8 / 11

Registration