



**Preliminary registration form for UGC-CSIR-NET-LS-DEC-2015 Full Course**

PERSONAL DETAILS:

Name: \_\_\_\_\_  
Title (Dr./Mr./Ms./Mrs.): \_\_\_\_\_ Designation: \_\_\_\_\_  
Institution/Lab/Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ Tel (Landline): \_\_\_\_\_  
Tel (Mobile): \_\_\_\_\_ Email: \_\_\_\_\_  
Previous numbers of NET attempts: \_\_\_\_\_  
Highest score in NET: \_\_\_\_\_

Affix a recent  
passport size  
photograph

Briefly explain why you intend to clear NET:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you are selected for preliminary enrolment you will be liable to pay a total of 12000/- to complete registration.

Send scanned copy of duly filled application form to [ibrcservices@yahoo.co.in](mailto:ibrcservices@yahoo.co.in).

Signature of the Applicant

Date: ..... Place: .....

**Note:** Each class has limited seats therefore the registered students will be allocated in batches on the basis of first come first served.