



**S I R J J C O L L E G E O F A R C H I T E C T U R E**

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**Application Form for Admission to  
Master of Architecture  
(By Research)  
Degree Course 2008**



Applicant's Signature \_\_\_\_\_

Please fill the form in Capital Letters  
**FULL NAME OF CANDIDATE**

\_\_\_\_\_ Last name      First name      Middle name

**CATEGORY** OPEN | RESERVED \_\_\_\_\_  
(If Reserved Category, please write particulars above and attach a certificate as prescribed by the Government of Maharashtra)

**SEX** MALE | FEMALE      **DATE OF BIRTH** \_\_\_\_\_ (dd/mm/yyyy)  
**NATIONALITY** INDIAN | OTHER (specify) \_\_\_\_\_

**FATHER'S FULL NAME** \_\_\_\_\_  
**MOTHER'S FULL NAME** \_\_\_\_\_

**PARENT'S/ GUARDIAN'S OCCUPATION** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
(for correspondence, with pin code)

**PERMANENT ADDRESS** \_\_\_\_\_  
(with pin code)

**PHONE** landline \_\_\_\_\_      **PHONE** mobile \_\_\_\_\_  
**E-MAIL** address \_\_\_\_\_

## SUMMARY OF QUALIFYING EXAMINATIONS

EXAMINATION	NAME OF EXAMINING BODY	YEAR OF PASSING	SUBJECTS OFFERED	MARKS OBTAINED	CLASS
HSSC/EQUIV EXAMINATION					
B. ARCH. / G. D. ARCH EXAMINATION					
OTHER EQUIVALENT EXAMINATION					
OTHER QUALIFICATIONS (if any)					

**PROFESSIONAL EXPERIENCE** (in years) \_\_\_\_\_  
 (Please give details on a separate sheet)

<b>PRESENT WORKING STATUS</b> (please tick)	<b>SELF EMPLOYED</b>	<b>EMPLOYED</b>	<b>FACULTY IN ARCHITECTURE</b>	<b>OTHER</b>
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Have You simultaneously applied for admission or been enrolled in any University for any other Degree or Diploma Course **YES** | **NO**  
 If yes, give details \_\_\_\_\_

The Principal  
 Sir JJ College of Architecture

Sir,  
 I wish to apply for the Master of Architecture (by Research) Degree Course of the University of Mumbai. If admitted, I hereby agree to follow and obey the rules and regulations at present in force and/or those that may be introduced and applicable to me as a student during this course. I also agree to obey and follow all other instructions and notices of the college and shall not indulge in any activities that would, directly or indirectly, interfere with the orderly governance and discipline of the college.

Applicant's Signature \_\_\_\_\_

Applicant's name \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_\_