

(FOR OFFICE USE ONLY)

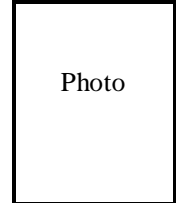
Receipt No. Amount Rs. Date.
Certified that Mr. /Km. /Smt.....
is here by allowed to appear in the.....
Roll No. Enroll No. Signature



BOARD OF NATUROPATHIC & YOGA SYSTEM DELHI

APPLICATION FORM FOR EXAMINATION 202....

To
The Registrar
Board of Naturopathic & Yoga System
Delhi



Photo

Sir

Permission is sought to be appeared in the ensuing examination of the20..... to be conducted by the Board of Naturopathic & Yoga System Delhi.

I will abide by all the rules and regulations, amendments there in from time to time decision and Directions from the Board and Registrar. The Examination fee Rs.duly attached with Bank Draft No. Bank.....Branch.....Date.....

1. Name of Applicant (IN CAPITAL).....
2. Father's / Husband's Name...(IN CAPITAL).....
3. Address.....
4. Mo. No.E-mail id.
5. Date of birth.....
6. Details of Examinations passed & Attested Photo Copy of Mark Sheets should be enclosed :-

S.NO.	Name of Examination	Roll No.	Enroll No.	Year	Marks Obtained	Division	Name of Institute
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

I/We do here by declare that the statement given above is true and to the best of my knowledge.

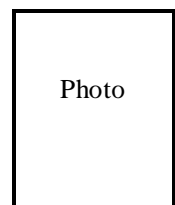
Signature of Applicant



BOARD OF NATUROPATHIC & YOGA SYSTEM DELHI

ADMIT CARD

Roll No. Enrol No.
Certified that Mr. /Km. /Smt.....
is here by allowed to appear in the.....
From Exam Centre.



Photo

Signature of Applicant

Date.....

Registrar