

Application No.....

(To be filled by the Office)



**योजना तथा वास्तुकला विद्यालय, नई दिल्ली**  
(संसद के अधिनियम के तहत राष्ट्रीय महत्व का संस्थान  
शिक्षा मंत्रालय, भारत सरकार)

**School of Planning and Architecture, New Delhi**  
(An Institution of National Importance enacted by an Act of Parliament,  
Ministry of Education, Government of India)

प्रवेश एवम परीक्षा विभाग ADMISSION AND EXAMINATION SECTION

**APPLICATION FORM FOR UG PROGRAMME, SESSION 2024-25**  
**(ARCHITECTURE/PLANNING : (ADMISSION THROUGH JoSAA))**

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Aadhar No. \_\_\_\_\_

1. Payment Particulars:

Details of Payment	Transaction ID	Date	Amount
(i) Amount paid at JoSAA counselling			
(ii) Balance Amount (if any) paid at SPA, Delhi			

2. Name of the Course: \_\_\_\_\_

3. Particulars of the JoSAA 2024 :

Roll No. \_\_\_\_\_

AIR Rank \_\_\_\_\_

4. Name of Candidate (in English) .....

First Name

Middle Name

Surname

(in Hindi) \_\_\_\_\_

5. Gender

Male

Female

Transgender

6. Category

Open Gen

SC\*

ST\*

PWD\*

OBC\*

EWS\*

KM

DS

7. Nationality

8. Date of Birth

(Date)

(Month)

(Year)

9. Father's Name

Note: \*Required to submit essential certificate in the Prescribed format as per Central List of Govt. of India, if applied for reserved seat

10. Mother's Name

11. Permanent Address:

Pin Code:  STD Code:

Telephone No.  Mobile No.

Email Id:

12. Address for Communication/  
Address of Local Guardian,  
If any

Pin Code:  STD Code:

Telephone No.  Mobile No.

13. Name of the State of Domicile:

14. Marks obtained in numericals in 'Mathematics' subject at 12<sup>th</sup>  
Standard Or equivalent (grades to be converted into numericals)

15. Details of Educational Qualification:

Name of the School	Examination/ Board	Year of Passing	Class/Division	Marks Obtained/ Max.Marks	Percentage of Aggregate Marks

## CANDIDATE'S DECLARATION

- (i) I hereby declare that the entries in this form are true to the best of my knowledge and belief. I have satisfied myself that I fulfill all the eligibility requirements.  
I understand that the admission is granted to me on the terms, conditions and rules of the School and such modifications thereof as may be made by the authorities concerned. I agree to abide by the rules and regulations of the School for the time being in force and such modifications thereof, which may hereafter be made.
- (ii) I agree that the decision of the Director, SPA, New Delhi shall be final and binding on me for all the matters concerning my admission, studies, scholarship, discipline and conduct etc.
- (iii) I understand that my association, active and passive, with any unlawful organization is forbidden.
- (iv) I agree that the School shall have the right to forfeit my security deposits on the ground of my failure to claim the refund within two years from the date of withdrawal of my admission/on completion of the course.
- (v) In the event of my selection, I undertake to submit an affidavit of Anti-Ragging as enclosed with the application from at the time of Admission.
- (vi) **I understand that my admission may be cancelled if any information furnished by me is proved to be false or willfully suppressed at any stage during my study in the SPA-Delhi.**

Dated:

(Signature of the Candidate)

(Signature of the Parent/Guardian)

## **PARENT'S/GUARDIAN'S DECLARATION**

My son/daughter/ward ..... is seeking admission with my consent and I am, personally responsible to the school for the payment of all his/her dues, as the Director may decide. I also agree that the candidate will abide by the discipline of the institution as administered by the Director.

Date:

(Signature of the Parent/Guardian)