



ଓଡ଼ିଆ ଭାଷା, ସାହିତ୍ୟ ଓ
ସଂସ୍କୃତି ବିଭାଗ



GKMORC

ଗୁରୁ କେଳୁଚରଣ ମହାପାତ୍ର ଓଡ଼ିଶୀ ଗବେଷଣା କେନ୍ଦ୍ର

GURU KELUCHARAN MOHAPATRA ODISSI RESEARCH CENTRE

B H U B A N E S W A R

Recent
Passport
size
Photographs

APPLICATION FORM FOR ADDMISSION

Name :

----- Parent's Name -----

Father :

Mother :

Date of Birth :/...../..... Gender : Male Female

----- Present Address -----

Sub Division :District :

Address:

----- Permanent Address -----

Sub Division :District :

Address:

Phone No. :

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 E-mail.....

Educational Qualification :
.....

Professional Qualification :
.....

Name of Guru (if learning privately) :

Name of institution :

Duration of learning :

Recommendation of guru/institution :

----- Mention details of learning (items / taalas etc. in 100 words) : -----

----- Mention why do you want to join ORC (100 words) : -----

.....
Student's Signature

.....
Authorised's Signature