

श्रीश्रीजगद्गुरुशङ्कराचार्यमहासंस्थानम्,

दक्षिणाम्नायश्रीशारदापीठम्, शृङ्गेरी

AFFIX YOUR
PASSPORT SIZE
PHOTOGRAPH
HERE

GITA JNANA YAJNA

Name / नाम _____

Father's Name / पितुः नाम _____

Address _____

District _____ PIN _____

Phone _____ Mobile _____

Age / वयः _____ Qualification / योग्यता _____

Name of Adhyapaka अध्यापकनामः _____

Profession / वृत्तिः _____

Examination Portion / परीक्षाविभागः ☐ 1-6 ☐ 7-12 ☐ 1-18

Signature of Candidate _____

Instructions

1. Print the first page of this document and fill it up in legible handwriting either in English or in Devanagari (Sanskrit).
2. Fold in three parts and send it via post to the following address -

THE CONVENOR, GITA JNANA YAJNA,
SRI SRI JAGADGURU SHANKARACHARYA MAHASAMSTHANAM,
DAKSHINAMNAYA SRI SHARADA PEETHAM,
SRINGERI, CHICKMAGALUR DISTRICT,
KARNATAKA _577 139
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