



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

ADMISSION NOTICE FOR SPONSORED CANDIDATES
FOR THE SESSION - 2026-27

Applications are invited for supernumerary seats of Sponsored Candidates from Central Government/State Government/PSUs for the Session 2026-27 for the following Post-graduate Programmes of the School:

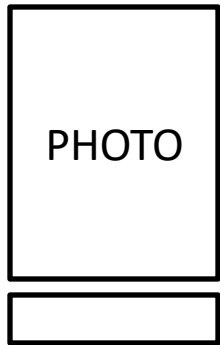
S.No.	Name of Programme
1.	Master of Building Engineering & Management
2.	Master of Architecture (Architectural Conservation)
3.	Master of Architecture (Landscape Architecture)
4.	Master of Architecture (Urban Design)
5.	Master of Design (Industrial Design)
6.	Master of Planning (Environmental Planning)
7.	Master of Planning (Housing)
8.	Master of Planning (Regional Planning)
9.	Master of Planning (Transport Planning)
10.	Master of Planning (Urban Planning)

The Application Forms for the above Programmes may be downloaded from the website of the School, www.spa.ac.in. The completed application form must be submitted along with Sponsorship Letter, Photocopy of receipt, after making online payment via **SBI Collect**, accessible from www.spa.ac.in. The **Non-refundable** application fee for Indian National is Rs.3,500/-. For the Odd Semester, starting from July/August 2026, the last date for submission of Application Form (complete in all respect) is **15th June, 2026**. Duly completed Applications Forms **MUST** reach on or before the last date at “**Admission and Examination Section, School of Planning and Architecture, 4, Block-B, Indraprastha Estate, New Delhi-110002**”. The date for interview for the eligible candidates shall be communicated separately on website of the School.

NOTE: For any clarifications Candidates may visit SPA New Delhi website www.spa.ac.in or contact: admission@spa.ac.in or helpline No.85277 38564 (on all working days between 10am and 5pm).

Sd/-
Registrar

A. APPLICATION FORM FOR ADMISSION (2026-27)
TO MASTER'S COURSES IN
(FOR SPONSORED CANDIDATES)



B. A candidate can apply in all Courses at all 3 SPAs. Application fee to be paid Rs.....
(If applying for two courses) with all sets of enclosures for each form

Name of Course	1 st Preference	2 nd Preference
1. Master of Architecture (Architecture Conservation)	<input type="checkbox"/>	<input type="checkbox"/>
2. Master of Urban Design	<input type="checkbox"/>	<input type="checkbox"/>
3. Master of Design (Industrial Design)	<input type="checkbox"/>	<input type="checkbox"/>
4. Master of Building Engineering and Management	<input type="checkbox"/>	<input type="checkbox"/>
5. Master of Landscape Architecture	<input type="checkbox"/>	<input type="checkbox"/>
6. Master of Planning with specialization in Environmental Planning	<input type="checkbox"/>	<input type="checkbox"/>
7. Master of Planning with specialization in Housing	<input type="checkbox"/>	<input type="checkbox"/>
8. Master of Planning with specialization in Regional Planning	<input type="checkbox"/>	<input type="checkbox"/>
9. Master of Planning with specialization in Transport Planning	<input type="checkbox"/>	<input type="checkbox"/>
10. Master of Planning with specialization in Urban Planning	<input type="checkbox"/>	<input type="checkbox"/>

C. Details of Payment:

PERSONAL RECORD

1. Name of Candidate (In English)
(in BLOCK letters) First Name Middle Name Surname

2. Gender Male Female

3. Father's Name

Occupation

Mother's Name

Permanent Address

Pin Code : STD Code :

Mobile No : Tele No :

Email ID :

4. Address for Communication:
Building/H.No :

Street/Colony :

City/Town :

State :

Pin Code : STD Code :

Mobile No : Tele No :

5. Date of Birth:

6. (a) Category:
SC/ST/PH/Open General/OBC (Non Creamy Layer)/ OM – Other Minorities
(Socially and Educationally Backward Class belonging to Minorities)
Any Other (Only if availing benefit)

(a) Do you belong to OBC (Minority) Yes No

If yes, mention your Minority

10. Details of Professional work and Experience during services

(Do not include Summer Training, Educational Training/ Course)

Sl. No.	Name of Organization	Post Held	Description and Type of Work	Period

11. Final Year Thesis / Project / Major Project (Brief Description of the Thesis Report:

12. Statement of Purpose (within the space below and around 500 words)
(For a chosen course of admission)

13. Statement of Purpose (within the space below and around 500 words)

Referees: (i)

Name:

Position:

Position:

Position:

Position:

(ii)

Name:

Position:

Position:

Position:

Position:

Signature of Candidate

14. SPONSORED / EMPLOYER'S CERTIFICATE

I (the undersigned) do hereby declare that to my personal, the details furnished by the candidate in the Form are correct.

15. Attach all required enclosures and complete the following tables.

Record of Enclosures

(Attested copies of certificates / documents)

(a) Certificate showing DOB	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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(b) Passing Certificate/ Qualifying Degree/ Diploma Examination	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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(c) Mark-sheets of all the semester/ year (For which result is declared)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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(d) Score Card: (GATE/ CREED/ Both)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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(e) Prescribed Certificate for Reserved Seats (if mentioned in SL. No	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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(f) Character Certificate	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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(g) Certificate of professional Experience (if mentioned in Sr.No.10)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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(h) Certificate of Sponsorship	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Signature of Candidate

16. CANDIDATE 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. I **understand that my admission may be cancelled if any information furnished by me is proved to be false.**

- (ii) I agree that the Director's decision in all matters concerning my admission, studies, discipline and conduct will be final and binding on me.
- (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) I have applied for each course I separate application form with complete set of enclosures and I have also mentioned my preferences for admission and I am aware that choice once mentioned by me will not change.

Date: _____

(Signature of Candidate)