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ODISHA UNIVERSITY OF AGRICULTURE & TECHNOLOGY,
Bhubaneswar-751003, Odisha



OUAT-ACD-III-CASE-0001-2025- 2693 /UAT., Dt- 24th Febru, 2026

CONVOCATION NOTICE

The 41st Convocation of the Odisha University of Agriculture & Technology, Bhubaneswar will be held on **10th March, 2026 at 11.00 A.M** in the “**Krushik Shiksha Sadan**”, OUAT Campus, Bhubaneswar.

The Degrees of Ph.D. and the Degrees of P.G. & U.G. Courses (2024 pass out) will be conferred and awarded to the successful candidates. The recipients of Ph.D. Degree holders /Gold medals/awards/Prizes shall have to apply on or before **05.03.2026 by 05.00 P.M** in the prescribed form available in OUAT web site (ouat.ac.in) through the concerned Deans / Director of the college with advance copy to the Assistant Registrar (Academic), OUAT through email (asstregistrar.acd@ouat.ac.in). The Ph.D. Degree students only will have to apply for the same along with a Demand Draft of Rs.3750/- (Rs.750/- for degree certificate and Rs.3000/- for academic robe fees) drawn in any nationalized bank in favour of **Comptroller, OUAT, Bhubaneswar** payable at Bhubaneswar.

Recipients of Ph.D. Degree holders /Gold medals/awards/ Prizes are required to attend a Rehearsal on **09.03.2026 at 11.00 A.M** in the “**Krushik Shiksha Sadan**”, OUAT Campus, Bhubaneswar.

➤ For any further information, please contact: 9439264722 / 7008492383


24/02/2026
REGISTRAR



ODISHA UNIVERSITY OF AGRICULTURE & TECHNOLOGY
BHUBANESWAR-751003, ODISHA

APPLICATION FORM FOR PARTICIPATION IN THE 41st CONVOCATION OF OUAT
SCHEDULED TO BE HELD ON 10.03.2026.

1. Name of the Candidates in Full (Block Letter) as enrolled in the University : _____
2. Admission No. : _____
3. Present correspondence Address : _____

4. Permanent home Address with the name of father or guardian : _____

5. e- mail ID : _____ Contact No: _____
6. Ph.D Degree to be Conferred :

Month & year of passing the examination	Adm. No	Subject	Amount of Rs.3750/- deposited with B.D. No. & Date

7. Gold Medals to be awarded:
1. _____
2. _____
3. _____
4. _____
5. _____

Signature of the Student
Date:

Memo No..... Dt.....

Recommended and forwarded to the Asst. Registrar(Acd.) for information and necessary action.

Dean/Director