



Application No.

APPLICATION FORM

INSTRUCTIONS

1. Form should be filled in Block Capital Letters in English Language with Blue Ink only by the Applicant.
2. Incomplete application will be rejected without any further communication.
3. Filling up of Application form does not guarantee the acceptance of request for evaluation.

(for Office use only)

Enrollment No. _____

EVALUATION APPLIED FOR _____

SPECIALIZATION _____

SESSION : 20 _____

YEAR 1/2/3/4 Appearing in Examination

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic	July / Winter	October / Calendar	January / Summer
			April

Credit Transfer

Lateral Entry

(As entered in Secondary / Senior Secondary Certificate)

NAME OF APPLICANT _____

GENDER Male Female Others

DATE OF BIRTH DD MM YY

FATHER'S NAME _____

FATHER'S OCCUPATION _____

MOTHER'S NAME _____

MOTHER'S OCCUPATION _____

NATIONALITY INDIAN OTHERS (specify the name of the country) _____

PASSPORT NO. _____ **VALID UPTO** _____ **VISA DETAILS IN INDIA** _____

(For Foreign Candidates Only)

SOCIAL STATUS GENERAL SC ST OBC PHYSICALLY HANDICAPPED MINORITY COMMUNITY

EMPLOYMENT GOVT. EMPLOYEE PVT. EMPLOYEE SELF EMPLOYED UNEMPLOYED OTHERS

Paste passport size photograph of applicant. Do not use pin or stapler. Enclose 2 identical photographs along with the Application Form

Signature of Applicant

PERMANENT ADDRESS _____

_____ PIN CODE _____

CITY _____ STATE _____ STD CODE _____

PH. NO. _____ MOB. NO. _____

e-mail _____

MAILING ADDRESS _____

_____ PIN CODE _____

CITY _____ STATE _____ STD CODE _____

PH. NO. _____ MOB. NO. _____

e-mail _____

Any change in address should be immediately communicated to the University

HAVE YOU EVER BEEN DEBARRED BY ANY UNIVERSITY / BOARD ? NO YES

If yes, then attach the details of the same.

Signature of the Applicant

Academic Details (enclose duly attested true photocopies of the originals)

S.No.	Name of Examination	Roll No	Year / Semester	Name of University / Institution / Board	Pass / Fail

Work Experience Details (Furnish Latest three details)

S.No.	Name and Address of the Organization	Total Experience in Years

DECLARATION BY THE APPLICANT

I hereby declare that aforementioned information and enclosed documents above are true and complete to the best of my knowledge and belief. I have read and understood the rules, regulation and eligibility conditions of the University. I shall submit any other document(s) that may be required by the University in future. I also agree that the University is empowered to cancel my candidature / admission, forego the fee deposited and also the claim for admission, if any information furnished by me is found to be incorrect, misleading or counterfeited. I further declare that the attested photocopies of the certificates submitted by me at the time of admission are the true copies of the originals.

Place & Date :

Signature of the Applicant

DECLARATION BY THE APPLICANT IN CASE OF CREDIT TRANSFER / LATERAL ENTRY

I hereby declare that I have already completed the formalities for year(s) of (Course Titled)
 from..... and agree to appear inyear(s) of examinations
 and also previous years' mismatched paper, if any.

Place & Date :

Signature of the Applicant