

REGISTRATION -CUM- EXAMINATION FORM

DATE :

SESSOIN

COURSE ROLL NO.

NAME : M/F.....

F.NAME.....

M.NAME.....

DOB.....UNI/BOARD.....

SUBJECTS.....

SNAP

MEDIUM..... LAST CLASS..... REGIS.....

GAP YEAR(if).....

CATAGORY MOB(1)..... (2).....

ADDRESS.....

..... PIN.....

PREVIOUS ACADEMIC RECORDS :-

YEAR	CLASS	ROLL NO.	MARKS	%	RESULTS	UNI/BOARD	LAST INSTIU

TOTAL FEE	
DATE	FEE RECIVED

1.FEE ONCE PAID NON REFUNDABE

2.THERE IS NO GURNTEE OF PASS

3.WE ARE RESPONSIBLE FOR ONLY CERTIFICATIONS RECORDS VERIFICATIOIS NOT FOR THAT ANY DEPARTMENT OR BODY APPROVED OR NOT APPROVED .

A) Declaration by the Candidate

I declare that the information given above is true and complete to the best of my knowledge & belief, and if any of it is found to be incorrect my admission shall stand cancelled and I shall be liable to such disciplinary action as may be decided by the University. The decision of the University there on shall be final.

Place _____

Date _____

Signature of the Student

B) Declaration by the Parent/Guardian

I undertake the responsibility of paying all dues of my son/daughter regularly and I bind myself for his/her dues compliance with all rules and regulations that are in force from time to time in the University.

Place _____

Date _____

Signature of the Parent/Guardian

Enclosure Check List (Tick whichever is applicable)

- 1. Date of Birth Certificate.
- 2. Attested Certificate and Mark sheets of Class X, XII and Graduation.
- 3. Character Certificate.
- 4. Medical Certificate.
- 5. Migration Certificate from the last Board/University.
- 6. Reserved Category Certificate.
- 7. FOUR Passport size coloured photographs.
- 8. GAP PROOF
- 9. ID PROOF
- 10.OTHERS

Verified.....