

8. Nationality

10. Employment Status

9. Category (tick mark whichever is applicable)
(Please attach category certificate if applicable)

Gen.	OBC	SC	ST	Others
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Details of Educational Qualifications (From Matriculation onwards) :

Name of the Examination	Subject	Year of Passing	Name of University/ Board	Division/ Grade

DECLARATION

I hereby declare that the information furnished herein above is true and correct to the best of my knowledge and belief. 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. I have read the prospectus and the rules and regulations of the University. In case any information is found incorrect, at any stage, I agree to forego the fee deposited and also the claim for admission.

Place & Date :

Signature of the Applicant

For A.F. use only

Eligible : (✓ Tick)	Yes	No	Course Fee paid in Full	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Fee Receipt Issued	Yes	No	Originals Verified	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Granted provisional admission subject to ratification by University.

Seal & Signature of Coordinator

(To be filled by the Office)

- ☐ Photocopy of High School Mark sheet & Certificate
- ☐ Photocopy of Intermediate Mark sheet & Certificate
- ☐ Photocopy of Graduation I, II, III Year Mark sheet & Certificate
(only applicable for PG Courses)
- ☐ Photocopy of Previous year mark sheet (in case of Credit Transfer)
- ☐ Photocopy of required Degree/Diploma (in case of Lateral Entry)

Eligible for the Course:

- | | | |
|---------|------------------------------|-----------------------------|
| 1. U.G. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. P.G. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. C.T. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. L.E. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Recommendation of Checking Officer

This is to certify that the candidate is eligible for admission. Enrollment no. may be allotted.

Enrollment No.

Checked by

Date :

Signature
(Sanctioning Authority)

DIRECTORATE OF DISTANCE EDUCATION, SWAMI VIVEKANAND SUBHARTI UNIVERSITY

EXAMINATION FORM (Batch.....)

Enroll. No.:

Roll. No.:

Name of the Programme with year:

A. Particulars of Candidate (In Block letters):

1. Full Name of Candidate (Sh./Smt/Km)
2. Father's/Husband's Name (Shri)
3. Mother's Name (Smt)
4. Date of Birth
5. Complete Address for Correspondence
6. Permanent Address
- Phone/Mob. No.: E-mail ID:
7. Address with City:
8. Preferred City of Examination:

Self-attested
Passport size
Photograph

B. Subjects of Examination:

S. No.	Paper Code	Title of Paper

C. Exam Fee Details:

Examination Fee Rs. in favor of SVSU, DDE, payable at Meerut.

D.D. Details: DD No. Date Amount Bank

UNDERTAKING BY STUDENT

I hereby undertake that

1. I know the eligibility to appear in the annual examination.
2. I have mentioned and submitted the course fee to the University.
3. I have correctly mentioned my enrollment number.
4. I have clearly filled all the subjects of my course in which I will appear in the examination.
5. I have mentioned all the details.
6. I have attended all the necessary practical classes at my study centre.
7. I have self attested my photograph on the form.
8. I have submitted my assignment work.
9. I have clearly mentioned the city in which I wish to give my examination.

All the information filled by me in this examination form is true to the best of my knowledge.

Sign. of Administrative Controller/Coordinator (with Office Seal & Date)

(Signature of Student with Full Name)



DIRECTORATE OF DISTANCE EDUCATION

(Established in 2009 & Approved by DEB of UGC)

Ph: 0121-6678000, Ext. 2800/01, E-mail: distance@subhartidde.com, Web: www.subhartidde.com

SWAMI VIVEKANAND SUBHARTI UNIVERSITY

(Established under UP Govt. Act No. 29 of 2008 and approved under section 2 (f) of UGC Act 1956)

E-mail: subharti@subharti.org, Web: www.subharti.org

PROFORMA FOR STUDENT'S DETAIL

S.No.	Particulars	
1.	Student Name	
2.	Father's Name	
3.	Aadhar Card No.	
4.	A.F. Code	
5.	Course	
6.	Course Medium	Hindi/English
7.	Mode of Delivery of SLMs & Other documents	By Post/By Hand
8.	Year	
9.	Batch	
10.	Enrollment No.	I Card Sent on
11.	Permanent Address	Pin Code :
12.	Landline No.:	Alternative No. :
13.	Mob. No.:	
14.	Email ID:	
	Alternative Email ID:	
15.	Fee Receipt/DD/NEFT/RTGS No. with date	
16.	Preferred Exam City with Location	

DECLARATION:

I hereby declare that-

1. The information furnished herein above is true and correct to the best of my knowledge and belief. 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. I have read the prospectus and the roles and regulations of the university. In case any information is found incorrect, at any stage, I agree to forgo the fee deposited and also the claim for admission.
2. I have not taken admission, simultaneously, in other equivalent course/s, anywhere.

Signature of Student