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Hazratbal Srinagar- 190006

Form No:

Form	for	admission	to

for the sessi	on			ENROLLMENT	No	
Name						Affix Self Attested
2 Father's Na	me					Passport Size Photograph
3 Regd. No			4. (i) Date	e of Birth	(dd/mm/yyyy)	I hotograph
(ii) Place of B						
6 Permanent		e	,			
7 Address for	r corresponde					
8 (i) District			(ii) Cell N	0	(iii) Phone No	
9. Whether a	permanent re	esident of J&K	State (Yes	/ No)		
	ion of Father/			,		
					ate the name of the Deptt	
12. State the		ategory if selec	ted under any	of the reversed catego	pries	
ame of the Exam.	Year of Passing	Marks Obtained	% age	Division/ Distinction	Regd.No	College/Institution through which passed
12th						
Graduation (Accregate)						
(Augiegale)	1					

I solemly declare/undertake that,

1) The particulars given above are correct

ii) I will obey all the statutes /regulations related to admission and also the instructions that may be issued from time to time by the University in this behalf. Any violation of the statutes and regulations of the University by me shall render

me liable to such punishment, disciplinary action, including cancellation of admissions, as the University a uthorities may impose on me.

iii) I am not serving in any Govt/Semi-Govt/Private institution or concern nor shall I serve or join any appointment during the tenure of the present program in the University

iv) I am serving in the Department

and have obtained permission of my employer for joining the course / programme in the University

vi) 1 am not enrolled for any other course in any other Department of this University or any other University. Date

Signature of the applicant

as a

Note: The Candidtes must approach the concerned Department and obtain permission from HOD for depositing the fee in the Bank.



THE UNIVERSITY OF KASHMIR

Hazralbal Srinagar-190006

Form No:

To be sent to the Dean Students Welfare by the Department after the completion of admission process.

Father's	Name					
Departme						_
Date of /	dmission					
Class Ro	II No					
Permane	nt home addre	255				
Address	for correspond	lence				
District			Contac	t No		
Date of E	Birth					
0 Academ	nic Record	1				
am.	Year of Passing	Marks Obtained	% age	Division / Distinction	Regd.No	College/Institution through which passed
	na na fanancia na					
rania #			+			
	i.					
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Dated						
					Sig	nature of the applicant
						· · · ·
					that the candidate in quine University Chest.	estion has
					S	ignature of the Head of the
						Deptt.with official seal
Dated						
Dated	(j.			C	Department:	an a

Signature of the Students

UNIVERSITY OF KASHMIR, SRINAGAR

1 Sandas		be reaction of a statement	USE OF CHIEF		YEAR/SESS	Form No:	
RD INDEX NO:							
irse Admitted to					Faculty		
ame of the stude	ent			2 Father's Na	ame		
ather's Professio	M		and the second		4 Gender : M	ale / Female	
ate of Birth		6 Se	mester		7 Roll No		
Contact No (a) Ca	-	a at Na) Parent's			
xamination pass							
Exam / Class	Ye	ear Marks C)bt. %age	Roll No	Category	School / College	
12 th							
Graduation (Aggr	egate)						
Any Other							
Examination par	ssed after Joinir	ng the Universi	ty				
Session	Class	Year	Roll No	Marks (Obt. %	age Semester Anareaate Mark	
		+					
		1					
	cords						
11 Hostel Rec (a) Name of th (b) Date of Adr	e Hostel Admitte		(c) Room N				

Signature of Students /Date

Signature of HOD / Date

310

Signature of Chief Proctor / Date

Conduct Record of the Student (For Office Use Only)

No.	Details of Episode	Date / Y	ear Final Repor	t / Status	Sign. of IO	Sig. of CP
etails of Issuan	ce of Conduct C	Certificate Sign. of Clerk	Sign. of		n. of	Sign. of

Note - This duly filled format is required to be submitted at the office of the Chief Proctor within fifteen days after completing admission at the department No form will be entertained thereafter.

Form No:

Declaration by Parent/Guardian

I am responsible for the conduct of my ward namely	
(in the University and undertake to pay
his/her dues and bear his/her expenses on books, tours and excursions. I am lia	able to make good any loss or damage to
the University property which may be caused as a result of misconduct of my wa	ard

Date: _

Sig. of Parent/Guardian

Name:_____ Address:_____

Enclosures:

1. Provisional certificate.

- 2. Year-wise marks certificates of the qualifying examinations
- 3. Character certificate
- 4. Certificate of permanent residence of J & K State.
- 5. Income Certificate
- 6. Migration Certificate (if Qualifying Examination is not passed from University of Kashmir)
- 7. Calegory Certificat (if selected under any of the reserved categories).
- 8. No Objection Certificate from the employer(if employed)