

KHALSA UNIVERSITY

Paste Latest Photograph

Under the Management of Historic Khalsa College Charitable Society Amritsar Estd. by Punjab Govt. Vide Act No. 44/2016 Under Section 3 of UGC Act, 1956

Please fill up the form in **CAPITAL LETTERS** and no column to be left blank

and attach 4 Photographs extra

For Office Use

•	s per your matriculation certificate. Tick the relevant box, as applicable.			Roll N	Roll No. :			
		Sought in (Writ	te the name of th	he programme)				
PERSONAL PARTICULA	RS							
* Name (Mr. / Ms.) (as written in matriculation / graduation or post graduation)								
* Father's Name								
Occupation								
* Mother's Name								
Occupation								
Total Family Income (per annum in rupees)								
Postal Address								
City					F	Pin Code		
Email ID								
Mobile No.				Alternate N	Mobile No.			
Land Line (with Code)								
Date of Birth	D D	M M Y	E A F	Gender:	: Male	Female	Trans	sgender
Nationality	Indian	Foreigner	Catego	ory: General	SC/ST	ОВС	Other _	
Passport Details (Only	for Internat	ional Applicar	nts)			D D M	им у	E A R
Passport No		Country:		E				
Hostel Facility Required Not Required								
Transport Facility (if re	quired) :							(Destination
Detail of Entrance test	: JEE (Main)/CAT/MAT/CN	//AT/ATMA or	any other Plea	ase specify			
Any Qualifying Exam	Passed	Year of P	assing		Rank		Score	
Do you have any serious	ailment? IF	yes, please spe	ecify					
Examination Passed	Year	Uni./Board	Uni./Board Roll No.	Institution where studied	College Roll No.	Marks Obtained	Percentage	Remarks
Matric								
Sr. Sec. (10+2)								
B.A. / B.Sc. / B.Com. / BBA								
M.A. / M.Sc. / M.Com								
Any Other exam.								
Gap Period if any Give Reasons					-			

Note: Please attach the photo copies of

- i) Detailed Marks Sheets (Matric, 10+2, Graduation, Post Graduation etc.)
- ii) Character certificate from Head of the Institution last attended
- iii) Migration Certificate
- iv) Four additional photographs
- v) Certificate of Reserved Category, if applicable

DECLARATION BY STUDENT

- a) I hereby certify that the information given by me in this form is true to the best of my knowledge and nothing has been concealed.
- b) I agree to observe and abide by all the rules and regulations (as amended from time to time) of the University in respect of course of study, syllabi, scheme of examination, conduct and related matters.
- c) I undertake not to organize or take part in any strike or demonstration.
- d) I fully understand that for any violation or infringement of the University rules and regulations. disciplinary action can be taken against me by the authorities.
- e) I have not been involved in any criminal offence and no case is pending against me in any court of law.
- f) I have neither indulged in any ragging activity in the past nor will I indulge in ragging directly or indirectly during my stay in the University.
- g) I clearly understand that in order to be eligible to appear in any term end semester examination. I must have attended not less than 75% of the delivered lectures of theory as well as practical in each paper as per norms.
- h) I promise to abide by the rules and regulations of Transport, Hostel of the University as applicable from time to time.
- i) I promise not to indulge in any use of intoxicant, smoking and drugs, etc.
- j) I am not suffering from any contagious or chronic disease.

Date __

		Signature of Student		
UND	ERTAKING BY PARENT/GUAF	RDIAN		
by the prescribed dates. I understar that if my son / daughter / ward lea from me the fee for the remaining p imposition of fine or cancellation or	aves the programme of study in the midward programme. I am aware that any delay in m	nded in any circumstances. I also understand y; the university has every right to recover laking payment of fees or dues may invoke		
Date		Signature of Parent / Guardian		
Father's Name	Mother's Name	Guardian's Name		
Occupation	Occupation	Occupation		
Designation	Designation	Designation		
Off. Address	Off. Address	Off. Address		
Mobile	Mobile	Mobile		
	FOR OFFICE USE ONLY	Sr. No		
	Date Amount			
Name of the Bank				
Receipt No Date	Amount	-		
(Verified by)		(Authorized Signatory)		