



## KAKATIYA UNIVERSITY

## School of Distance Learning and Continuing Education

Warangal 506 009 A.P.

## Application form for Admission to P.G. / P.G. Diploma / Diploma/Certificate Courses

( For Office Use Only)	Course _____	Regd. No. _____	
	Date of Admn. _____	Subject _____	Admn. No. _____
	Date of Leaving _____	Study _____	HT No. _____
	T.C. No. _____	Centre _____	
Admitted / Rejected			

## PARTICULARS OF THE CANDIDATE (in Capital Letters)

Surname	_____						Please affix recent pass-port size photograph					
Name	_____											
Father's Name	_____											
Mother's Name	_____											
Date of Birth	Day	Month	Year	Age	Signature of the Candidate							
	_____	_____	_____	_____								
Social Status	SC	ST	BC	A	B	C	D	OC	Sub-Caste	Sex	Male	Female
	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

## PARTICULARS OF QUALIFYING EXAMINATION

Programme/ Course	Name of the University/Board	Institution Studied	Year of Passing	Max. Marks	Marks Obtained	Percent- age (%)	HT No.

## FEE PARTICULARS

YEAR	DD/Challan No.	Amount Rs.	Date
Previous			
Final			

## CERTIFICATES ENCLOSED

Original		Xerox	
TC No.		DC/PC	Memo of Marks
MC No.		SSC Memo	Caste
Identification Marks :			
1)			
2)			

## Address for Postal Correspondence

_____	
_____	
Pin Code	_____
Mobile	_____
e-mail ID :	

**Declaration of the Candidate :** I hereby declare that all the particulars given above by me are correct and true. I will obey the rules and regulations of the University that are in force time-to-time. My admission may be cancelled at any time in case the above particulars given by me are found false and untrue. I will also obey the rules relating to the University's Court jurisdiction (Warangal courts).

Date :

Signature of the Candidate

Clerk

Member  
Admission CommitteeJoint Director  
Admissions

DIRECTOR