

15. Qualifying Examinations Passed

Examination Passed	Board/University	Reg No. & Year of passing	Marks obtained	%Of Marks	Class Obtained

16. Applicants Profession (√) : Full Time/Part Time/Business/Agriculture/Unemployed/Housewife/Retired/Other

17. Fee payment details

S.No.	TYPE OF FEE	(RS.)
	Total	

Fee Paid DD No:

Dated :

Branch of remittance :

Name of the Bank:

Declaration by the Candidate: I acknowledge to have fully read the prospectus and certify that I have understood all the provisions indicated therein. I certify that I am qualified for the program as indicated in the prospectus. I hereby certify that all particulars stated by me in application are true to the best of my knowledge and belief. I understand that my admission is liable to be cancelled if I suppress or distort any information furnished in my application. I understand that University reserves the right to modify/ delete the syllabi, program structure, rules and regulations, as and when required. I understand fees once paid will not be refunded. I understand that the University reserves the right to cancel the admission without assigning any reason.

Place :

Date :

Specimen signature

1.

2.

Signature of the Applicant

STUDY CENTER

I certify that I have personally verified the original certificates and the attached documents including DD's. I certify that the candidate fulfill the eligibility criteria as per Admission Qualification norms prescribed in the prospectus. I shall be held responsible for any kind of litigation with regards to services.

Place:

Date :

Study Center Seal

Signature of Co-ordinator


KSOU

Program eligibility (Program/Semester)

Checked by Verified By.....

Note: 1. Candidates are required to attach the following documents with this form

- a) Attested photocopies of the Certificates/Detailed Marks Cards of the qualifying exams.
- b) Crossed DDs
- c) Identity Card (Duly filled & photograph pasted by the candidate) and attested by study center co-ordinator
- d) Candidates are advised to collect the candidate Copy of the Receipt for Admission from the Study Center

Stamp size Photograph	KARNATAKA STATE OPEN UNIVERSITY		
	MYSORE-570 006 and MindTrek Edutech Pvt. Ltd.		
Student ID Card			
Name of the student :			
Roll No:			
Year of Admission :	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	Cycle	<input type="text"/>
Name of the Study Centre and Code:			
Address:			

Name of the Programme:	
Name of the Course & Semester:	
Signature and Seal of the Institution	Signature of the Student
Deputy Registrar (Admission)	
Identity Card is not Transferable	
It is valid only when the Identity Card of the Student is duly attested by the Deputy Registrar (Admission), KSOU, Manasagangotri, Mysore-06	