

Cost of Application Form Rs.20/-


 Fee Remitted Rs...../- Receipt No. Dt...../...../.....  
 Cash Counter/Chalan/SBT/Draft/Friends Janasevana Kendram

# MAHATMA GANDHI UNIVERSITY

## APPLICATION FOR REGISTRATION TO THE CBCSS DEGREE EXAMINATION

..... SEMESTER : MARCH-APRIL/OCTOBER – NOVEMBER 20.....

\*PR Number should be filled in by the candidates EXCEPT THE FIRST SEMESTER REGULAR

\* Permanent Register Number :

1.	Name of Candidate (CAPITAL LETTERS )	
2.	Name of College	
3.	Name of Programme	
4.	Name of Stream ( )	Model. I /Model. II /Model. III
5.	Date of Birth	...../...../..... Gender: Male/Female
6.	Address for communication with Phone number and Email	PIN Code.....
*7.	Whether Eligible for Fee concession ( )	[Yes / No].If Yes, State Category : ..... SIGNATURE OF THE PRINCIPAL:
*8.	State whether having Sufficient Attendance ( )	[Yes / No]. If No, State whether applied for Condonation [Yes / No] SIGNATURE OF THE PRINCIPAL:

### \*\*DETAILS OF COURSES

1. **Common Course I (ENGLISH)**
  - 1) Title.....
  - 2) Title.....
2. **Common Course II (Addl. Language)** Title .....
3. **Core Course**
  - 1) Title.....
  - 2) Title.....
  - 3) Title.....
  - 4) Title.....
  - 5) Title.....
  - 6) Title.....
4. **Choice Based Core Course** Title.....
5. **Complementary Course**
  - 1) Title.....
  - 2) Title.....
6. **Vocational Core/Optional Core** Title.....
7. **Open Course** Title.....
8. **Project & Viva**

Signature of the Candidate:

Signature of the Head of the Department :

\*Column No. 7 &amp; 8 should be recommended by the Principal \*\*Details of courses should be attested compulsorily by the HOD to ensure that the titles of the papers are entered correctly by the candidate.

Place: