



KUVEMPU UNIVERSITY
DIRECTORATE OF DISTANCE EDUCATION
 JNANA SAHYADRI, SHANKARAGHATTA-577451, SHIMOGA DISTRICT, KARNATAKA



A

FORM –A : APPLICATION FORM FOR ADMISSION

REGISTER NUMBER									
CENTRE CODE									
2014-15									

Admission to II/III YEAR UG/PG COURSES

- ❖ *This application must be used only if the ONLINE APPLICATION of the concerned student was not displayed in our online website.*
- ❖ *The application is not considered if the double the duration of the course is completed.*

**AFFIX A STAMP
SIZE PHOTO OF
THE CANDIDATE
HERE**

Name of the Candidate (In Block Letters)													
Father's Name													
Course			Course Code										
Subject/Combination													
Year of the course (II/III Yr)													
Languages (for II BA,BCom,BSc)			Lang-1 (Specify):					Lang-2: English					
Medium of Exam													
Name of Study Centre													
Address for communication <i>(Do not repeat Name & Father's Name here)</i>													
District				State				PIN					
Phone Number						Cell No.							
Date of Birth				Day				Month				Year	
Nationality													
Sex		Male [] Female [] <i>(Tick the appropriate box)</i>											
Caste Group		SC		ST		OBC		GEN		Physically Challenged		PHC	
Occupation						Annual Income							
Details of Fee Paid		Amount		Challan/Receipt Number				Date		Drawn on Bank			
		₹											

DECLARATION

I hereby solemnly and sincerely affirm that the statement made and information furnished in my application submitted by me are true. Should it, however be found that the information furnished therein is not actually true, I know that I am liable for prosecution and forfeiture of the admission.

Date:

Place:

Signature of the Applicant

FOR OFFICE USE ONLY

" Verified the above information & Fee payment details"



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B

FORM – B : EXAMINATION APPLICATION FORM- 2014-15 (FOR FRESHERS)

Register Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Study Centre	<input type="text"/>								
Name of Exam Centre (write only place name)	<input type="text"/>								

**AFFIX A STAMP
SIZE PHOTO OF
THE
CANDIDATE
HERE**

Course (BA/BSc/BCom/BBM)	Course Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subject/Combination	<input type="text"/>						
Year of the course (II/III Yr)	<input type="text"/>						
Medium of Exam	<input type="text"/>						

Details of the Candidate

Name

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Age

<input type="text"/>	<input type="text"/>
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Sex

<input type="text"/>	<input type="text"/>
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List of Papers of the Courses with Paper Code Numbers

(Against each paper, If not appearing write NA and if appearing, write APP)

SL	PAPER CODE NO.	TITLE OF THE PAPER	NA/APP
1			
2			
3			
4			
5			
6			
7			
8			
9			
Total Number of papers appearing			

Attest Xerox copies of marks cards of ALL PREVIOUS exams to be enclosed

Note: The candidate should enter his/her name in the name column and it should be same as entered in the admission application, as this will be entered in the Marks Card and Degree Certificate. The Kuvempu University, Directorate of Distance Education will not be responsible for entering the name wrongly.



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JNANA SAHYADRI, SHANKARAGHATTA-577451, SHIMOGA DISTRICT, KARNATAKA



H

HALL TICKET -2014-15 (FOR FRESHERS)

Register Number	<input type="text"/>
Name of Study Centre	<input type="text"/>
Name of Exam Centre (for office use only)	<input type="text"/>

**AFFIX A STAMP
SIZE PHOTO OF
THE CANDIDATE
HERE**

Course (BA/BSc/BCom/BBM)	<input type="text"/>
Subject/Combination	<input type="text"/>
Year of the course (II/III Yr)	<input type="text"/>
Medium of Exam	<input type="text"/>

Details of the Candidate

Name	<input type="text"/>
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	D	D	M	M	Y	Y	Y	Y		M	F
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Age	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Sex	<input type="text"/>	<input type="text"/>

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7			
8			
9			
Total Number of papers appearing			

Signature of the Candidate

Date