



**SHRI MATA VAISHNO DEVI UNIVERSITY**  
 Katra, Kakryal-182320, J&K (India)  
*[Recognized under section 12(B) & 2(f) of the UGC Act, 1956]*  
**APPLICATION FORM FOR ADMISSION**  
**2019-20**

**Affix a recent  
 passport size  
 photograph here  
 & attach five  
 more with this  
 form**

Please tick (✓) as applicable:

1. Program applied for:

B.Arch.  M.Tech.  M.Sc.  M.B.A.   
 M.Sc. (Economics)  MA  Ph.D.(Full-time)  Ph.D.( Part –time)   
 (5 Years Integrated Degree Program)

2. School/Branch/Specialization:

Computer Sc.&Engg.  Mechanical Engg.  Electronics & Comm. Engg.   
 Biotechnology  Architecture  Energy Management  Physics   
 Mathematics  Biotechnology  Business Management  Economics   
 English  Ph.D. specialization area:.....

3. Bank Demand Draft No: \_\_\_\_\_ Drawn on: \_\_\_\_\_ Date: \_\_\_\_\_  
 Amount (Rs.) \_\_\_\_\_ (in words) \_\_\_\_\_

Physically challenged/PD/PWD: YES  NO

4. Please fill up the following (as applicable) from your JEE-Main or NATA (for B.Arch.); MAT/CMAT/CAT (for MBA); GATE (for M.Tech.) GATE//MAT/C-MAT/JAM/XAT/JMAT/SNAP/GRE/GMAT etc. (for NRI/Foreign PG Seats; GATE/CSIR/JRF/NET/INSPIRE fellowship (for Ph.D.)

(a) Examination Center Code:

(b) Roll No.:

(c) Application No.

(d) Test Date:

D D M M Y Y Y Y

(e) Rank/Score:

5. Name in full: \_\_\_\_\_  
 First Name Middle Name Last Name  
 (In block letters as mentioned in Matriculation/Secondary School certificate)

**\*All relevant documents to be submitted along with the Form.**

6. Date of Birth: \_\_\_\_\_  
(Date) / (Month) / (Year)

7. Father's Name: \_\_\_\_\_

8. Mother's Name: \_\_\_\_\_

9. Guardian's Name: \_\_\_\_\_

10. Gender: MALE  FEMALE  OTHERS

11. Marital Status: MARRIED  UNMARRIED

12. State of Domicile: \_\_\_\_\_ Nationality: \_\_\_\_\_

13. Permanent Address (H.No., Street, Locality, Village/City, District, State): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
(Pin Code) \_\_\_\_\_

14. Address for Correspondence: (H. No., Street, Locality, Village/City, District, State): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
(Pin Code) \_\_\_\_\_

15. Phone \_\_\_\_\_ Mobile No.: \_\_\_\_\_

Alternate Mobile No.(1) \_\_\_\_\_ (2) \_\_\_\_\_

Email ID \_\_\_\_\_ Parents' email ID \_\_\_\_\_

16. Medium of Instruction at Qualifying Exam.: English  Hindi  Other

17. Academic Qualifications: [Attach a separate sheet if space provided is insufficient]

School Certificate/ Degree	Name of the University/ Institution/ Board	Major Subjects	Year of Passing	Marks/ CGPA		Division/ Class	Remarks
				% of Marks	CGPA		
Matriculation/ Secondary (10 <sup>th</sup> )							
Higher Secondary / Intermediate (10+2)							
Bachelor's Degree if applicable							

Master's Degree if applicable							
Other Academic Qualification							

18. Whether pursuing any other Full-time/Part-time Degree/Diploma course. If yes, give details:

\_\_\_\_\_

\_\_\_\_\_

19. List of Enclosures: [Please attach self attested copies of documents as proof against information given in the application form.]

1: \_\_\_\_\_ 2: \_\_\_\_\_

3: \_\_\_\_\_ 4: \_\_\_\_\_

5: \_\_\_\_\_ 6: \_\_\_\_\_

7: \_\_\_\_\_ 8: \_\_\_\_\_

I declare that the information given by me in this Application form is correct. I understand that if this information is found incorrect, false or forged, at any stage, my admission in SMVD University or the degree awarded to me by SMVD University is/will be liable to be cancelled. I also agree to comply with all the rules, regulations and code of conduct of the SMVD University.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

**(Signature of the Applicant)**

**Name of Applicant**.....

**Branch**.....

<b>For Office Use Only</b>
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**Received By:**

Signature, Name & Designation of receiving official:

Name: \_\_\_\_\_ Designation: \_\_\_\_\_

Date: \_\_\_\_\_ Place \_\_\_\_\_ Signature \_\_\_\_\_