



JAIPUR NATIONAL UNIVERSITY

Directorate of Distance Education

Programmes approved by joint committee of DEC-UGC-AICTE

ADMISSION-CUM-EXAMINATION FORM

Note: All entries must be filled in by the candidate himself / herself in capital letters.

Enrolment No. : JNU-jpr/

(Leave Blank)

Paste your passport size photograph, duly attested by Head of the Institution. Avoid use of pin or stapler. Please enclose two identical photographs along with the Application Form

Course Applied for : Specialization (Wherever applicable):

Year	<table border="1" style="display: inline-table;"><tr><td> </td><td>1</td></tr><tr><td> </td><td>2</td></tr><tr><td> </td><td>3</td></tr></table>		1		2		3	Lateral Entry <input type="checkbox"/>	Session:	January <input type="checkbox"/>	<table border="1" style="display: inline-table;"><tr><td>2</td><td>0</td><td>1</td></tr></table>	2	0	1
	1													
	2													
	3													
2	0	1												
			July <input type="checkbox"/>											

(Put a cross mark 'X' in the appropriate box.)

Signature of the candidate (in box)

(Fill information below as per Secondary / Senior Secondary Certificate)

Name of the Candidate

Father's Name

Mother's Name

Date of Birth:

D	D

M	M

Y	Y	Y	Y

 Nationality: INDIAN Others Specify Name.....

Gender: Male Female Category: General OBC ST / SC Others

(Put a cross mark 'X' in the appropriate box.)

Contact Address:

PIN Code

Landline No. with STD Code : Mobile: E-mail:

Note: All Communications will be mailed at the above address.

Educational Qualifications :

S. N.	EXAMINATION	BOARD / UNIVERSITY	YEAR	% MARKS	SUBJECTS
1	10th (Secondary)				
2	10 + 2 (Senior Secondary)				
3	Graduation				
4	Post Graduation				
5	Any Other Qualification				

DECLARATION BY THE CANDIDATE

Ihereby declare that the information furnished in this form is true to the best of my knowledge and belief. I understand that my candidature is liable to be cancelled by the University if any information given above by me is found incorrect or misleading.

Place: _____

Date: _____

Signature of the Candidate _____

VERIFICATION CERTIFICATE

I have verified the original documents including DDs. The candidate fulfills the eligibility criteria as per the prescribed norms of the University.

Place: _____

Date: _____

Verified by _____

PAYMENT OF FEE

S. N.	Particulars of Fee	Amount (in Rs.)	Payment Details
1	Course Fee		A/c Payee Draft No. _____ Dated _____ Rs (in figures) _____ in words Rs. _____
2	Admission Fee		
3	Examination Fee		
4	Total Fee (in Rs.)		

*Note: Fee once deposited will not be refunded. However, if the university does not find the candidate eligible for admission, the fee will be refunded.