Cost Rs. 50/-

Directorate of Distance Education
J. R. N. Rajasthan Vidyapeeth(Deemed-to-be) University

(Declared Under Section 3 of the UGC Act, 1956 vide Notification No. F. 9-5/84-U-3, January 12, 1987 of the Government of India)

Pratap Nagar, Udaipur-313001, Rajasthan, India

EXAM FORM

1. Enrollment No. of the Student | Study Center Code | Place | State

2. Full name of the student (as per 10th Board Certificate)

3. Father's name :

4. Mother's name :

5. Complete address for Correspondence (Do not repeat name)

Pincode | STD Code | Telephone Number | Email

Number of resitting subjects (Mandatory) 6. Course : Stream :

7. Name and code number of subject in which candidate is appearing :

SEMESTER	PAPER CODE	NAME OF THE SUBJECT

8. Bank draft number with details

Bank Name | Amount in Rs | DD Number | DD Date

9. Declaration By the Applicant

a. I certify that I have read and understood all the provisions indicated in the prospectus and the Circulars published in the website **www.rvduniversity.com** from time to time.
b. I certify that after being fully satisfied with this course I have decided to get enroled out of my own free will and desire.
c. I further certify that same is done without any inducement and misrepresentation either from the said University or other person concerned.
d. I shall abide by this undertaking and shall not hold anybody responsible for the same in any manner either during running of course or on its completion.
e. I hereby certify that all the particulars stated in this application are true to the best of my knowledge & belief. In the event of suppression or distortion of any fact made in my application form, I understand that my admission is liable to be cancelled. I understand that university has The right to add/delete/change the syllabi, Course structure, rules & regulations as and when required, as per change in environment.
f. I understand that FEES once paid will NOT be refunded.

Date :

Place :

Signature of the Candidate

10. Certified by Center Co-ordinator:

Certified that the Enrollment Number, Name, Examination Particulars have been verified and found correct as per the record.

Study Centre Code | STD Code | Telephone Number | Email

Signature & Seal of the Centre Head of the Study center :

Specimen signature of the Candidate

Space for Photograph

Paste one recent stamp size photograph preferably Coloured

Please do not Pin or Staples

IMPORTANT

* Paste your latest stamp size photograph
* The photo should not project outside the box
* Candidate's signature must be within the box provided.