Form No.

## Directorate Of Distance Education Janardan Rai Nagar Rajasthan Vidyapeeth (Deemed-to-be) University Pratap Nagar, Udaipur-313001, Rajasthan

64805

	ADMISSION FO	RM/ENROLLM	ENT FORM	The second secon			
Enrollment No. (Leave Blank) (For Office Use Only)							
1. Course Opted:	Stream:		Semester/Year:	Paste self attested recent passport size photograph and put your signature over it.			
2. Specialization/Elective:		3. Regulat	ion:- R1 R2 BAP				
4. D.D Details:  D.D No./ Ch	allan No. Date		Control Contro	of the Bank			
5. Year Session Jan. July 6. Resource Centre Code: 0 0 1 RC Name: Mumbai							
7. Study Centre Code:	Study Centre Na			Withingar			
8. Name of Applicant: (As Per Matriculation Marks Card) 9. Father's Name:							
10. Mother's Name :							
11 . Full Address:							
PIN: Phone:							
			Phone:				
13. Date of Birth: 14.Sex: Male Female 15.Category Tick (/)box SC ST OBC GENERAL OTHERS							
16. Region: Urban Rural 17. Nationality: Indian Others 18. Whether Tick (/)box PHY. CHALLENGED DEFENCE EX.SERVICEMAN							
Name of Examination Passed	Board/University	Year of Passing	Div./ Percentage	Subject			
20.Please fill the Course code Pe	and Name and 11						
20. Please fill the Course code, Paper Name and credit of the Courses offered.  Sr. No. Course Code Name of Course (Paper)							
1.		Name of Course (F	'aper)	Credit			
2.							
3.							
5.							
6.							
7.							
8.				· · · · · · · · · · · · · · · · · · ·			
Tick (/) the relevant Boxes		A Submitted in the Control of the Co					
			*				
1. Photograph and self Signature							
2. Date of Birth Certificate  [All the Documents must be attested by Gazetted officer as well as Study Centre							
5. Certificates and Marksheets of 10th (10+2)/U.G/P.G Co-ordinater.]							
4. Demand Draft/Challan for programme fee with name & Form No. overleaf.  5. Category Cert. in response to col. No.15							
Janardan Rai Nagar Rajasthan Vidyapeeth (Deemed-to-be) University (For Office Use Only)							
0:							
Signature of the Concerned	Clerk Sign	ature Checked by	Director DDF	IDMDVIII C:			

## UNDERTAKING BY THE STUDENTS

To,			
The Director Directorate of Distance Education J.R.N. Rajasthan Vidyapeeth University Udaipur, Rajasthan.			Photo
Sir/Madam,			
This is to declare that, I	have taken admissio Stream under J.R.N. Rajasthan Vidy closed related to my qualification re	n in yapeeth (Deemed garding the adm	Son programme in l-to-be) University. ission are genuine
I say and submit that I am under going to-be) University, Udaipur to gain and e in teachings job.	programme of J.R. nhance my knowledge and Academic	N. Rajasthan Vic c value and I may	dyapeeth(Deemed- not get advantage
I say and submit that to gain Join programme University,Udaipur and further advance		id Academic v sthan Vidyapee	value I want to th (Deemed-to-be)
In the event of suppression or distort nationality and study period etc. made cancelled.	ion of any fact like educational qu in my application form, I understand	ialification, doci d that my admis	iments related to sion is liable to be
I am eligible for the examination as per to consequences if the information filled by any stage my application will be rejected also would be void.			
I further say and submit that even if I of undertake not to hold the above Univergetting no benefit of said course. I say a enhancement of my knowledge and noth my own risk and cost. I further say that satisfied with contents of the same.	and declare that above course advan	on responsible in aced by said Uni	n any manner for versity is only for
I also undertake not to claim any damage	for the same.	9 9	
Whatever is stated herein above is true ar	nd correct to my own knowledge and b	pelief.	
Place :	Signature of the	Candidate	
Date:	Enrollment No.		
UNDE	RTAKING BY THE STUDY CENTRE		700000000000000000000000000000000000000
This is to certify that Mr./Ms./Mrs Daughter / Wife photo pasted on this form depicts his / documents enclosed herewith. I attest this/her result is finally not declared durejection and not the University.	her current appearance correctly.	tered from our S I have personally	y checked all the
Dlace			
Place:	Name & Signature of the Director	Study Centre	
Date:	Study Centre Code:	,	1
	Seal:	V v	
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