P.K. UNIVERSITY
SHIVPURI (M.P.)

Enrollment Form

To,
The Registrar,
P.K. University
Thanra, Shivpuri (M.P.)

Enrollment No. _____

Self-Signed & Duly Attested Passport Size Photograph with the H.O.D. Seal

Sir,

Giving the following details, I request you to please enroll me in the P.K. University, Shivpuri (M.P.) and also communicate me the allotted Enrollment Number: I have read all the rules, regulations and ordinances of the university relevant to me and I promise to abide by them. I also promise to obey all the rules and regulations enforced by the university in future.

1 Name of Course in which admitted _____ **Branch:** _____

2 Name (हिंदी में): _____

Name (In English) (In Block (Capital Letters) as per 10th Class Marksheet)

3 Father/Husband Name (हिंदी में): _____

Father/Husband Name (In English) (In Block (Capital Letters) as per 10th Class Marksheet)

4 Mother's Name (हिंदी में): _____

Mother's Name (In English) (In Block (Capital Letters) as per 10th Class Marksheet)

5 Gender: Male ☐ Female ☐ Other ☐ **6 Date of Birth:** D D M M Y Y Y Y

7 Category: General ☐ OBC ☐ SC ☐ ST ☐ Other ☐ **8 Religion :** _____

9 Date of Admission: D D M M Y Y Y Y **10 Nationality:** _____

11 Previous /Last Qualification Details

Class/Course	Board/University	Passing Year	Subjects/Branch	Marks Obtained	%

12 AADHAR No. (Attach Copy) : _____ **13 ABC/APAAR ID** : _____

14 Permanent Address: _____

_____ **Pin Code:** _____

15 Contact No.: _____ **E-Mail ID:** _____

Date: **Signature** _____

Office Use Only

Certified that the above student has been admitted to this institution/faculty through procedure laid down in this regard. The entries above have been checked and verified by me from the records. Therefore I recommend that he/she should be enrolled as requested by the student.

Date: ……

Name & Signature with seal