

Serial No.

Reg. No.....
(To be filled in by the candidate)

Incomplete Application or Applications with insufficient Examination Fees will be summarily rejected

SRI VENKATESWARA UNIVERSITY, TIRUPATI

FORM OF APPLICATION FOR REGISTRATION

M.B.A. DEGREE EXAMINATIONS20
I / II / III / IV Semester / Year (Strike off which is not applicable)

Examination Centre :											
NAME (As spelt in the lower degree Certificate) (Women Candidates should add the word "WOMAN" after their names) Enclose Xerox copy duly attested	In English Expand Initials										
	In Mother Tongue										
Age and Date of the Birth in Christian Era											
Name and occupation of the father or guardian with address and annual income (Enclose Xerox copy of B.A., B.Sc., B.Com. Degree Certificate)											
Nationality		Religion :	Caste : <table style="display: inline-table; border: none; vertical-align: middle;"> <tr> <td style="border: none; padding: 0 5px;">OC</td> <td style="border: none; padding: 0 5px;">BC</td> <td style="border: none; padding: 0 5px;">SC</td> <td style="border: none; padding: 0 5px;">ST</td> </tr> <tr> <td colspan="4" style="border: none; text-align: center;">Strike off which is not applicable</td> </tr> </table>	OC	BC	SC	ST	Strike off which is not applicable			
OC	BC	SC	ST								
Strike off which is not applicable											
Address of the candidate (All communications will be sent to this address only)											
Date of Passing B.A./B.Sc./B.Com. Degree Examination and Name of the University		Name of the University : Register Number : Year and Month of Passing the Degree Exam : All the candidates appearing for the first time for the exam should enclose the original lower Degree Certificate or its equivalent Certificate recognised by this University along with its recognition order, if any Otherwise their results will not be released.									
<u>Regular/Regular supplemental Candidates</u> College at which candidate has studied for the examination and period of study (B.A./B.Sc./B.Com.) Whether enclosed lower qualifying degree certificate.		Actual date of admission to the course : Period of Study : College at which studied									
Candidates who are reported for Malpractice of where found committed malpractice should fill in this column.		Year and Month in which reported Restiction or found guilty of malpractice	Period of								
Papers Chosen :		Papers Chosen :									
Note : 1. Should write all the Title of all the papers as given in the Regulation		1. 2. 3. 4. 5. 6. 7. 8. 9. 10.									
2. Whether the candidate appearing whole examination (or) Paper (or) Papers Tick whichever applicable.											

If the candidate is appearing now for subsequent time, the Reg. Nos. and the year of previous appearance should be stated. (To be filled in by Failed / Absented Candidates only)	Year	Reg. No.	Failed / Absented
<p>Particulars of Fee Paid :</p> <p>Note : Postal Orders / Money Orders / Mail Transfers and Demand Draft will not Be accepted.</p> <p>Amount Rs: On-line Challan No.</p> <p>Date of Payment :</p> <p>Name of the Bank :</p> <p>Place :</p> <div data-bbox="277 987 568 1207" style="border: 1px solid black; padding: 5px; margin: 10px auto; width: fit-content;"> <p style="text-align: center;">Candidate should affix his / her passport size Photo here duly attested by the Identifying officer on the Photo</p> </div> <p style="text-align: center;"><i>Signature of the Identifying Officer</i></p>			
<p>Signature of Principal of the College (for Regular Students only)</p>			

Station

Date

Signature of the Candidate in full.