

Sr. No. _____

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ADMISSION FORM

COURSE APPLIED FOR. _____

Name.(In Capital) : _____ Mobile No. _____ Email ID. _____

Date of Birth. Gender. _____

Father's Name: _____ Mobile No. _____ Occupation. _____

Mother's Name: _____ Mobile No. _____ Occupation. _____

Annual Family Income _____ Category (please specify) _____

Permanent Address _____ City _____ State _____

Check List of Enclosures

	TICK (✓) IF ORIGINAL	TICK (✓) IF PHOTOCOPY	TICK (✓) IF PENDING
(a) Matriculation certificate containing Date of Birth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Detailed marks of qualifying examination/ Marks Sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Character certificate from college / school last attended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Proof of Residence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) 5 Passport Size Photographs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Admission slip issued by University/ Board.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(g) Gap Certificate if any	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(h) Medical Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(i) Migration Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scholarship Documents			
(a) Caste Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Adhar Card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Income Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Residence Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Copy of Pass Book	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fee Detail

Course/Tuition fee (Per Semester)	.....	Fee Paid	.....
Less :-			
Scholarship Benefit Amount on tuition fee (Per Sem.)	.....	Receipt No.	.....
Gross Fee Payable.	.....	Payment Date	.....
Add :-			
Registration Fee	.....	Balance Fee	.....
Other Charges	.....	
Hostel Fee/Transport Fee	.....	
Net Fee payable.	.....	

Fee & Documents Submission Date

Semester	Fees & Documents Deadline	Remarks	Semester	Fees & Documents Deadline	Remarks
1.	30 August		5.	30 October	
2.	30 October		6.	30 March	
3.	30 March		7.	30 August	
4.	30 August		8.	30 October	

DECLARATION BY THE STUDENT

- (a) I hereby certify that the information given by me in this form is true to the best of my knowledge and nothing has been concealed.
- (b) I agree to observe and abide by all the rules and regulations (amended from time to time) of the institution in respect of courses of study, syllabi, scheme of examination, discipline & conduct, dues & related matters.
- (c) I also understand that for any violation or infringement of the college rules / regulations, disciplinary action can be taken against me by the authorities.
- (d) I have never been involved in any criminal offence and no case is pending against me in any court of law.
- (e) I am taking admission at my own risk / cost and responsibility. (f) I will abide by University decision on my eligibility. (g) Any dispute will be subject to Mohali Jurisdiction.

Date :

Signature of the student

Entrance Test Score

☐ JEE☐ MAT☐ JET

Roll No.....Rank.....State.....

Educational Qualification

Note : Write NA against a column if it is not applicable

Level	Name of Board/University	School/College	Subjects	Year	Percentage (%)
Matric or Equivalent					
10+2 or Equivalent					
Diploma after Matric					
Graduation					
Other/Specify					

How do you come to know about Universal Group Of Institutions?

Newspaper ☐College Staff ☐Teleconferencing ☐

Other/specify.....

Associate Code ☐

Associate Code No.....Consultant's Name

Contact No.....Email ID.....

Fee Received.....Incentive Due.....

Incentive PaidBalance Incentive.....

UNDERTAKING BY THE PARENT/GUARDIAN

(a) I hereby undertake to make payment of all fee and dues on behalf of my son/daughter/ward Mr./Ms.....
.....(name of student) of the college by the.....
prescribed dates. I am aware that any delay on my part in payment may invoke imposition of fine or dismissal of my ward from the institution.

(a) I take full responsibility for behavior of ward & fully agree with his/her declarations.

Date :

Signature of Parent/Guardian
(Name & Relation)_____
College Staff Promoter_____
Counselor_____
Head Admissions_____
Finance Officer_____
Director Admissions

Remarks..