

# 14. Registration Form



## DR. C.V. RAMAN UNIVERSITY APPLICATION FORM FOR WALK-IN-ADMISSIONS (JANUARY / JULY SESSION)

Application No.

[Strike out the Session whichever is not applicable]

1. Programme Name : <input style="width:100%;" type="text"/> Group if, any		PHOTOGRAPH AFFIX  (4 X 5 cm) duly attested  <input style="width:100%; height: 20px;" type="text"/> Signature of Candidate
2. Programme Code <input style="width:100%;" type="text"/>	7.(B) Enrolment No. (For Office Use Only) <input style="width:100%;" type="text"/>	
3. Study Centre Code <input style="width:100%;" type="text"/>	8. Aadhaar No., <input style="width:100%;" type="text"/>	
4. Medium Code (Write their relevant code in the box) A1 English <input style="width:20px;" type="text"/> B2 Hindi <input style="width:20px;" type="text"/>	9. Date of Birth <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> <input style="width:20px;" type="text"/> Date Month Year	
5. Category (Write the relevant code in the box) A1 - Gen C3 - ST <input style="width:20px;" type="text"/> B2 - SC D4 - OBC <input style="width:20px;" type="text"/>	10. Nationality A1 Indian <input style="width:20px;" type="text"/> B2 Others <input style="width:20px;" type="text"/>	
6. Marital Status A1 Married <input style="width:20px;" type="text"/> B2 Unmarried <input style="width:20px;" type="text"/>	11. Territory Code A1 Urban <input style="width:20px;" type="text"/> B2 Rural <input style="width:20px;" type="text"/> C3 Tribal <input style="width:20px;" type="text"/>	
7.(A) Registration No. (If Student already Registered in CVRU) <input style="width:100%;" type="text"/>	12. Religion A1 Hindu <input style="width:20px;" type="text"/> B2 Muslim <input style="width:20px;" type="text"/> C3 Christian <input style="width:20px;" type="text"/> D4 Sikh <input style="width:20px;" type="text"/>	
13. Sex A1 Male <input style="width:20px;" type="text"/> B2 Female <input style="width:20px;" type="text"/>		
14. State Code <input style="width:20px;" type="text"/>		
15. Whether Minority A1 Yes <input style="width:20px;" type="text"/> B2 No <input style="width:20px;" type="text"/>		
16. Name of the Candidate (Leave one box empty between First Name, Middle Name and Surname) (Please write Name as per your last qualification marksheet) <input style="width:100%;" type="text"/>		
17. Father's/Husband's Name (Strike out whichever is not applicable) <input style="width:100%;" type="text"/>		
18. Mother's Name <input style="width:100%;" type="text"/>		
19. Relevant Qualifications: (Which makes you eligible for the programme)		
(a) Qualification Code <input style="width:40px;" type="text"/>	(b) Main Subjects <input style="width:100%;" type="text"/>	(c) Year of Passing <input style="width:40px;" type="text"/> (Last 2 Digits only)
(d) Division <input style="width:40px;" type="text"/> (01.02.03 or 04) for pass		(e) % of marks <input style="width:40px;" type="text"/> (Do not use Decimals)
(f) Board Code <input style="width:40px;" type="text"/> (Wherever required)		
20. Address for Correspondence (Do not give Post Box No. Leave a blank between each unit of address like House No., Street Name, P.O. etc.) <input style="width:100%;" type="text"/> <input style="width:100%;" type="text"/> City <input style="width:400px;" type="text"/> District <input style="width:400px;" type="text"/> State <input style="width:600px;" type="text"/> Pin Code <input style="width:100px;" type="text"/>		
21. Landline Telephone Number (if any) with STD Code STD Code <input style="width:40px;" type="text"/> Telephone No. <input style="width:100px;" type="text"/>	22. Mobile Number (if any) <input style="width:150px;" type="text"/>	
23. E-mail Address/ID (if any) <input style="width:100%;" type="text"/>		
24. Whether a person with Disability (Write the relevant code in the box) A1 Yes <input style="width:20px;" type="text"/> B2 No <input style="width:20px;" type="text"/>	25. If a person with disability (nature of disability) (Write the relevant code in the box) A1 Speech and Hearing Impairment <input style="width:20px;" type="text"/> B2 Locomotor Impairment <input style="width:20px;" type="text"/> C3 Visual Impairment <input style="width:20px;" type="text"/> D4 Low Vision <input style="width:20px;" type="text"/> E5 Any other Please specify <input style="width:20px;" type="text"/>	26. Employment Status (Write the relevant code in the box) A1 Unemployed <input style="width:20px;" type="text"/> B2 Govt. Employed <input style="width:20px;" type="text"/> C3 Private Employed <input style="width:20px;" type="text"/> D4 Self Employed <input style="width:20px;" type="text"/>
27. Income : (a) Family Income (Yearly) <input style="width:100px;" type="text"/> (b) Below Poverty Line A1 Yes <input style="width:20px;" type="text"/> B2 No <input style="width:20px;" type="text"/>		

**28. Key Skills (Tick whichever applicable)**

**IT Skills**

M.S. Office  Tally  Typing  DTP  Programming  Animation   
 Web Design  Networking

**Repair & Maintenance Skills**

Computer repair  Mobile Repair  Photocopy Machine Repair   
 Electrical & Electronic Repair

**Soft Skills**

Selling  Negotiation  Administration  Communication   
 Teaching/Coaching Any Other Skills .....

**29. Languages Known**

	Read	Write	Speak
Mother Tongue			
Other Languages Known	Read	Write	Speak
1.			
2.			
3.			

**30. Employment Details**

Total Work Experience: Years..... Months.....

**Current Employment Status**

Organization	Industry	Designation	Department	Time Period		CTC (in Lacs.)
				From (dd/mm/yy)	To (dd/mm/yy)	

**31. Previous Employment Status (Up to last five employers)**

Organization	Industry	Designation	Department	Time Period		CTC (in Lacs.)
				From (dd/mm/yy)	To (dd/mm/yy)	

**32. Personal Information**

Physically Handicapped: ..... Physically Handicapped Category.....

Driving (Tick whichever applicable):

Two Wheeler  Four Wheeler  Both  Driving License No: .....

**33.(a) Educational Details**

Academic Qualification	Board/ University	Stream (Name of Course & Subjects)	Year of Passing	Percentage/ Division
8 <sup>th</sup> Standard				
10 <sup>th</sup> Standard				
12 <sup>th</sup> Standard				
Graduation				
Post Graduation				
Ph.D				
Diploma				
Certificate				

**33. (b) Any other Technical / Vocational Qualification / Course you have done, in addition to above :**

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 .....

**34. Submit**

Please submit your resume and latest passport size photograph to your AISECT-CVRU Centre or upload your photograph on [www.rojgarmantra.com](http://www.rojgarmantra.com) after receiving the username and password.

**35. Job Preferences**

Are you willing to travel outside your state for a job? (Y/N) (Tick whichever applicable)  
 Salary Expected or CTC (Rupees per Annum) :

**36. Your References (Professional references are a must)**

1. Name : .....	2. Name : .....
Designation : .....	Designation : .....
Company : .....	Company : .....
Phone No : .....	Phone No : .....

**DECLARATION BY APPLICANT**

I hereby declare that I have read and understood the conditions of eligibility for the programme for which I seek admission. I fulfil the minimum eligibility criteria and I have provided necessary information in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund of any fee paid by me to the University. Further, I have carefully studied the rules of the University as printed in the Prospectus and I accept them and shall not raise any dispute in future over the same rules.

Date

Signature of Candidate

**CHECKLIST**

**Tick the relevant boxes**

**Affix photograph and enclose the following attested copies.**

- (i) Demand Draft/Challan Form for Programme fee/fee for 1st Year/1st Semester.
- (ii) Certificates in support of your educational qualification(s)
- (iii) Experience Certificate wherever required.
- (iv) Category Certificate wherever required.
- (v) Age Certificate for SC/ST/PH/Kshamiri Migrant/War Widow candidates wherever required.
- (vi) Student Card duly filed in along with photograph.
- (vii) Acknowledgement Card dully stamped.

**CATEGORY CERTIFICATE (I)**

(i) SC/ST Candidates

This is to certify that Mr./Ms./Mrs. \_\_\_\_\_ son/daughter/wife of Shri \_\_\_\_\_ of Village \_\_\_\_\_ Town \_\_\_\_\_ Dist. \_\_\_\_\_ State/U.T. \_\_\_\_\_ belongs to \_\_\_\_\_ Caste which is recognised as Scheduled Caste/Scheduled Tribe under the Constitution

(Scheduled Caste Part C States) Order 1951 read with the SC/ST list (Modification Order,1956)

Mr./Ms./Mrs \_\_\_\_\_ and his/her family reside in Village/Town \_\_\_\_\_ District \_\_\_\_\_ State U.T. \_\_\_\_\_ .

(Signature of Tehsildar/Commissioner/District Magistrate)

Place : \_\_\_\_\_

Signature : \_\_\_\_\_

Date : \_\_\_\_\_

Seal/Samp

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**CATEGORY CERTIFICATE (II)**

(ii) OBC candidates (only non-creamy layer)

This is to certify that Mr./Ms./Mrs. \_\_\_\_\_ son/daughter/wife of Shri \_\_\_\_\_ of Village \_\_\_\_\_ Town \_\_\_\_\_ Distt. \_\_\_\_\_ State/U.T. \_\_\_\_\_ belongs to \_\_\_\_\_ Caste who are eligible for availing the benefits as per central list of 5 to

13 Cs/OBC as per Resolution No. 12011/68/93-DCC(C) of Ministry of Social Justice & empowerment as modified from time to time by that Ministry based on the advice of the National Commission for Backward Classes. (NCBC). Mr./Ms./Mrs. \_\_\_\_\_ and his/her family reside in Village/Town \_\_\_\_\_ District \_\_\_\_\_ State U.T. \_\_\_\_\_ .

(Signature of Tehsildar/Commissioner/District Magistrate)

Place : \_\_\_\_\_

Signature : \_\_\_\_\_

Date : \_\_\_\_\_

Seal/Samp