



CENTRE FOR DR. B.R. AMBEDKAR STUDIES
KURUKSHETRA UNIVERSITY KURUKSHETRA

(Established by the State Legislature Act XII of 1956)
(‘A+’ Grade, NAAC Accredited)



Application No:

Admission Form

Paste your passport
size photograph

Name of Candidate:

Father' Name:

Date of Birth: Gender: M F

Category: (SC/BC/General)

Please specify the Course/Certification opted for: **Tally Essential Level 1** **Tally Essential Level 2**

Tally Essential Level 3

ADDRESS FOR COMMUNICCATION

Address line 1:

Address Line 2:

City:

Mobile No.:

Whats app No.

E-Mail:

ACADEMIC QUALIFICATIONS

| S. N. | Institution/Board/University | Degree | Subject | Percentage/ CGPA | Year |
|-------|------------------------------|--------|---------|------------------|------|
| 1 | HSC/12 th | | | | |
| 2 | Graduation | | | | |
| 3 | Post Graduation | | | | |

Dept./College _____ Class _____ Roll No. _____

Enclosures: - 10+2 Certificate Graduation Certificate Post Graduate Certificate

(Please tick) Caste Certificate Dept. Identity Card

DECLARATION

I hereby declare that the information provided by me in the application is true and correct to best of my knowledge. My signature below certifies that I have read, understood and agree to the rules and regulation of TIL & Kurukshetra University.

Place:.....

Dated:.....

Signature of the Applicant