CENTRE FOR DR. B.R. AMBEDKAR STUDIES
KURUKSHETRA UNIVERSITY KURUKSHETRA
(Established by the State Legislature Act XII of 1956)
('A++' Grade, NAAC Accredited)

No. : CDBRAS/24/.£5.1.
Dated:.1.6| 1.0| 24

EXTENDED ADMISSION NOTICE

To

All the Chairpersons/Directors/Principals.
Kurukshetra University,
Kurukshetra.

Sir/Madam

The Centre for Dr. B.R. Ambedkar Studies is running successfully two **Computer Training Programmes in Basic Computer & Web Designing.** Online applications are invited for these training programmes as per details given below:-

Name of the Training Programme	Duration	Fee	
		SC/ST students	Other students
Basic Computer Training Programme	3 Months	Rs. 750/-	Rs. 1500/-
Web-Designing	3 Months	Rs. 750/-	Rs. 1500/-

All University students who are interested to join above said training programmes may download admission form from **kuk.ac.in** or contact to the office of **Centre for Dr. B.R. Ambedkar Studies**, K.U. Kurukshetra (Mob. 9518225972). Last date for submission of scanned copy of duly filled admission form (email: dirbrasc@kuk.ac.in) has been extended upto **30.10.2024** The selected candidates are required to deposit fees through online (Director, Centre for Dr B. R. Ambedkar Studies) KUK, **Account No 39092309422, SBI, IFSC: SBIN0001600 KUK)** from **18.10.2024 to 30.10.2024.** The session / classes will commence from **31.10.2024** for these training programmes.

Director
Centre for Dr. B.R. Ambedkar Studies
K.U. Kurukshetra-136119

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

ADMISSION FORM

Three Months Computer Training Programme (Basic & Web- Designing)
(5th Batch: 01-10-2024 to 30-12-2024)

Paste your passport size photograph

Name of the Candidate (In Block Letters) _____

Father's Name _____

Mother's Name _____

Date of Birth _____

Permanent Address _____

_____

_____

Pin Code: _____ Mob. No _____

Correspondence Address _____

_____

Pin Code: _____ Mob. No. _____

Educational Qualification _____

_____

_____

Caste (SC/BC/General) _____

Name of Dept, Class & Roll No. _____

_____

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

(Please tick)   Caste Certificate ☐   Dept. Identity Card ☐

Place: ....

Dated: ....

_____
Signature of the Applicant

Chairperson/Head of Dept. /
Principal of College with seal