

**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/26/21b.  
Dated: 22.10.1996

ADMISSION NOTICE

Te

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 from [kuk.ac.in](http://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](mailto:dirbrasc@kuk.ac.in)) 28.02.2026. 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 27.01.2026. to 28.02.2026. The session / classes will commence from 01.03.2026 for these training programmes.

Director 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)  
(11<sup>th</sup> Batch)**

Paste your  
passport  
size  
photograph

Name of the Candidate (In Block Letters)

Father's Name

Mother's Name

Date of Birth

Permanent Address

Correspondence Address

Pin Code: \_\_\_\_\_ Mob. No. \_\_\_\_\_

Educational Qualification

Pin Code: \_\_\_\_\_ Mob. No. \_\_\_\_\_

Caste (SC/BC/General)

Name of Dept, Class & Roll No.

Enclosures: - 10+2 Certificate

(Please tick) Caste Certificate

Graduation Certificate

Fee Receipt Copy

Dept. Identity Card

Place: .....

Dated: .....

\_\_\_\_\_  
Signature of the Applicant,

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