



# SRINIVAS UNIVERSITY

(A State Private University, established by Act 42/2013 of Karnataka Legislative Assembly)

Administrative Office : G.H.S. ROAD, MANGALURU - 575 001, KARNATAKA, INDIA

Phone No.'s : 0824 - 2425966, 2421566, 4268494, 2444891 Fax No. : (0824) - 2442766, 2423302

E-mail : admission@srinivasuniversity.edu.in Website: www.srinivasuniversity.edu.in

**(ONLY SUBJECT TO COURTS/JUDICIAL FORUMS AT MANGALURU, D.K)**

**Application No.**

## APPLICATION FORM

**PHOTOGRAPH**  
Paste your recent size  
photograph not older

**FOR ADMISSION  
ACADEMIC YEAR  
20\_\_\_ - \_\_\_**

NAME OF THE APPLICANT (IN CAPITAL LETTERS) (AS PER THE "X" CERTIFICATE)

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**DATE OF BIRTH**

**SEX (TICK ONE)**

**CASTE (GEN./SC/ST/OBC/COMMUNITY-SPECIFY)**

**BLOOD GROUP**

<table style="width: 100%; text-align: center;"> <tr> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> </tr> <tr> <td>DATE</td><td>MONTH</td><td>YEAR</td> </tr> </table>				DATE	MONTH	YEAR	<table style="width: 100%; text-align: center;"> <tr> <td style="width: 20px; height: 20px; border: 1px solid black;"><input type="checkbox"/></td> <td style="width: 20px; height: 20px; border: 1px solid black;"><input type="checkbox"/></td> </tr> <tr> <td>MALE</td><td>FEMALE</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	MALE	FEMALE		
DATE	MONTH	YEAR											
<input type="checkbox"/>	<input type="checkbox"/>												
MALE	FEMALE												

DATE MONTH YEAR MALE FEMALE

**STATUS: GENERAL/NRI/FOREIGN NATIONAL**

**COUNTRY OF PERMANENT RESIDENCE**

**STATE OF DOMICILE**

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**MOTHER TONGUE**

**PLACE OF BIRTH**

**NATIONALITY**

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**FATHER'S NAME**

**OCCUPATION**

**ANNUAL INCOME**

--	--	--

**MOTHER'S NAME**

**OCCUPATION**

**ANNUAL INCOME**

--	--	--

**FATHER'S MOBILE NUMBER**

**FATHER'S E-MAIL ID:**

--	--

**MOTHER'S MOBILE NUMBER**

**MOTHER'S E-MAIL ID:**

--	--

**STUDENT'S MOBILE NUMBER**

**STUDENT'S E-MAIL ID:**

--	--

**GUARDIAN'S MOBILE NUMBER**

**GUARDIAN'S NAME (if parent's is not alive)**

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**COURSE PREFERRED (PUT  MARKS)**

- |   |  |   |  |   |                              |
|---|--|---|--|---|------------------------------|
| 1.B.Sc. (IMT) <input type="checkbox"/>  | 6. B.Sc.(AT & OT) <input type="checkbox"/> | 11. IIMCA (LT) <input type="checkbox"/> | 16. MBA <input type="checkbox"/>         | 21. B.Tech (CS) <input type="checkbox"/>    | 26. <input type="checkbox"/> |
| 2.B.Sc. (MLT) <input type="checkbox"/>  | 7. B.Sc.(RDT) <input type="checkbox"/>     | 12. MSW <input type="checkbox"/>        | 17. BPT <input type="checkbox"/>         | 22. B.Tech (Civil) <input type="checkbox"/> | 27. <input type="checkbox"/> |
| 3.B.Sc. (CVT) <input type="checkbox"/>  | 8. B.Sc.(Perf. T) <input type="checkbox"/> | 13. BBA <input type="checkbox"/>        | 18. MPT <input type="checkbox"/>         | 23. B.Tech (E&C) <input type="checkbox"/>   | 28. <input type="checkbox"/> |
| 4.B.Sc. (Opto) <input type="checkbox"/> | 9. B.Sc.(HM) <input type="checkbox"/>      | 14. BCA <input type="checkbox"/>        | 19. B.Sc. (ID) <input type="checkbox"/>  | 24. B.Tech (Mech) <input type="checkbox"/>  | 29. <input type="checkbox"/> |
| 5.B.Sc. (RCT) <input type="checkbox"/>  | 10. BHMCT <input type="checkbox"/>         | 15. B.Com <input type="checkbox"/>      | 20. M.Tech (SE) <input type="checkbox"/> | 25. <input type="checkbox"/>                | 30. <input type="checkbox"/> |

**COURSE DETAIL:** \_\_\_\_\_

Specialisation if any (please specify)

\_\_\_\_\_  
*Signature of the Applicant*

**PRESENT POSTAL ADDRESS :-**

.....City.....  
 District.....State.....Pincode.....

**PERMANENT POSTAL ADDRESS :-**

.....City.....  
 District.....State.....Pincode.....

**PAN NUMBER : (To be filled Compulsorily)****FATHER'S**

**MOTHER'S**

**ACADEMIC INFORMATION :**

Examination	Name of the Institute	Location	Year of Passing	Subjects	Board/University	Class and %
S.S.L.C/ Equivalent						
P.U.C/ Equivalent						
Degree/ Equivalent						

**DECLARATION BY THE CANDIDATE**

I, Mr./Ms.....S/o./D/o.....

have carefully read and fully understood the details given in the prospectus for admission. I hereby fully agree to the terms and conditions set by the institution and declare that,

- (i) The information furnished by me is correct and complete in all respects and if at any time the information/Certificate submitted by me is found to be false, the seat allotted to me will be summarily cancelled and I will be liable for criminal prosecution.
- (ii) In all matters regarding my admission to the course, the decision of the Principal is final and binding on me.
- (iii) I shall abide by the college and hostel rules and regulations in force and as amended from time to time.
- (iv) I will do nothing unworthy of a student of the college either inside or outside the college/hostel campus.
- (v) The Principal has the full authority to expel me for disinterest in studies, misbehaviour and continuous failure in attending class or examinations.
- (vi) I will strictly follow the dress code/uniform prescribed by the college. In the interest of discipline and decorum I myself undertake not to wear indecent, unethical, non-acceptable dresses. Further, I understand & I comply with the requirements of the college and no dress which is reflecting my political or religious belief or inclination will be a part of my dress in the campus.

- (vii) I am fully aware of the law regarding prohibition of ragging and the punishments therein. If I indulge in any action which can be defined as ragging under the law or possessing and using cell phone or any other legally banned items, I will be liable for fine/suspension/dismissal prosecution as per law including the impounding of cell phone and other banned items found in my possession.
- (viii) No part of the fees paid under any head will be refunded at any point of time and for whatever reasons, if I choose to discontinue my course at any time after admission, I am liable and bind myself to pay the full fee of the entire course to which I was admitted.
- (ix) The admission is subject to the approval/eligibility criteria as prescribed by the regulations of Srinivas University and I undertake to fully comply with its requirements.
- (x) I also undertake to pay the fees and other dues of the Institution/recognised bodies promptly and regularly and/or on demand.
- (xi) Once I join a course, any change over to other course is not permissible.
- (xii) Once I join the hostel I will continue till the end of the academic year.
- (xiii) Principal/Warden has all rights to allocate/shift to any of the hostel room/building at any point of time as per the decision of the appropriate authority.
- (xiv) I abide by all the hostel rules and also bind myself not to disturb other inmates in the hostel.
- (xv) I am liable to be sent out of the hostel for act of indiscipline or when the hostel/ mess dues is not paid in time/or when demanded.
- (xvi) Any disputes arising in respect of my admission or any other matter shall be only decided at the discretion of the management and will be **subject to the jurisdiction of courts/Consumer Redressal Forum/Authorities at Mangaluru only.** Any outside authority will not have the restriction over any of the above matters.

Place :

Date :

**SIGNATURE OF THE APPLICANT**

**DECLARATION BY THE PARENT/LEGAL GUARDIAN**

I,.....S/o./D/o.....

Address:-.....

.....do hereby state that, I have also read and understood

the above declaration made by my son/daughter/ward Mr./Ms.....

Further I also state that:-

- (i) I have read and agree for the above terms and conditions and I assure to co-operate with the college authorities and assure the progress and good behaviour of my son/daughter/ward.
- (ii) I am aware that, my son/daughter/ward will be subjected to the punishment stated above for ragging or unauthorisely bringing the cell phone to the college campus.
- (iii) I assure that I will call on college, Principal and faculty members as frequently as possible to discuss the attitude and progress of my son/daughter/ward.
- (iv) I also assure to give all assistance and co-operation to Principal in all actions taken in the interest of the students in general and cause of education and prograss of my son/daughter/ward in particular.
- (v) I undertake that, my son/daughter/ward will strictly follow the dress code/uniform prescribed by the college. In the interest of discipline and decorum I also undertake that, my son/daughter/ward will not wear indecent, unethical, non-acceptable dresses. Further, I will comply with the requirements of the college and no dress which is reflecting his/her political or religious belief or inclination will be a part of his/her dress in the campus.
- (vi) I am also aware that the college will not refund the fee either in full or in part, under any circumstance. If my son/daughter/ward decides to discontinue the course at any time after joining, I hereby undertake to pay the college fees and dues for the remaining duration of the course.
- (vii) I also certify that the information provided by my son/daughter/ward is true and that if any information furnished is found to be untrue, then my son/daughter/ward or /and I may be liable for criminal prosscution.
- (viii) Submission of false documents will also render the seat allotted to my son/daughter/ward invaild.

Place :

Date :

**COUNTER SIGNATURE OF THE PARENT/  
LEGAL GUARDIAN (Mention relationship)**

**P.T.O**

**GUIDANCE NOTES :**

- ✓ You should ensure that you have filled in all the required information correctly.
- ✓ Please ensure that you have submitted the following documents along with the form.

**Attested copies of :**

- ✓ 10<sup>th</sup> Standard marks card for proof of date of birth
- ✓ 12<sup>th</sup> Standard marks card
- ✓ TC / Conduct / Migration Certificate
- ✓ Aadhar Card

Registration Fee of Rs.1000/- by Cash/DD favouring  
**“SRINIVAS UNIVERSITY”**  
payable at Mangaluru, Karnataka

The application form with all enclosures should be forwarded personally / through post ;

**SRINIVAS UNIVERSITY**  
**ADMINISTRATIVE OFFICE : G.H.S. ROAD, MANGALURU - 575 001**  
**KARNATAKA, INDIA**

**FOR OFFICE USE ONLY**

DATE : \_\_\_\_\_

NAME: \_\_\_\_\_ COURSE: \_\_\_\_\_

FEESPAIDDETAIL : \_\_\_\_\_

REGISTRATIONFEES: \_\_\_\_\_

\_\_\_\_\_  
*Receiver's Name & Signature*