

Sr. No. _____

DDE Ref.No. _____

(To be assigned by the office)

DIRECTORATE OF DISTANCE EDUCATION
KURUKSHETRA UNIVERSITY KURUKSHETRA
ADMISSION FORM (Session January/July 2020)

FORM 'A'

- Note :-** 1. Candidates are advised to submit attested copies of marks sheet/certificate of qualifying exam, affidavit in lieu of Migration Certificate on the format (page -87) with their forms for checking of their admission eligibility.
2. The candidate must mention his/her Name, Father's Name, Address, Class on the back side, Left Corner of the Bank Drafts, failing which the Directorate shall not be responsible for the loss of Bank Drafts.

APPLICATION FORM FOR ADMISSION TO _____ **Part** _____ (1st / 2nd / 3rd)*
Bank Draft No. _____ Dated _____

Amount Rs. _____

Name of Issuing Bank: _____

Details of Fee Deposited by Bank Voucher: _____

For Office Use

DDE Fee Receipt No. & Date _____

Fee Clerk _____

Fee Asstt. _____

Affix with gum
your latest
Passport size
Photograph duly
ATTESTED

Signature of the candidate

1. Name (**IN BLOCK LETTERS**) _____ 2. Date of Birth: _____
3. Father's Name _____ 4. Mother's Name _____
- 4(a). K.U. Regn. No. _____ 4(b). Have you been issued Migration Certificate from K.U.? **Yes/No***
(if already registered with K.U.K.) (If Yes, affidavit as ANNEXURE at page-87 must be submitted)
5. Indian/Foreigner* Haryana Resident/Other State* Gen/SC/ST/EWS/BC-A/BC-B/DA/ESM/DFF/Blind*
If Foreigner, Name of the Country Urban/Rural* Sex (M/F/ Transgender)*
6. Postal Address _____
Block _____ District _____ State _____
Pin _____ Mobile No.** _____ E-Mail _____
7. Are you simultaneously appearing in any other examination? If so, indicate: Class/Exam. _____
Full Paper/Compt./Improvement _____ Exam Date _____
Number of Papers _____ University/Board _____
8. Aadhar Number: _____ Annual Income _____
9. Session of joining 1st year of the course _____
10. Self/Ward/Spouse of KU regular employee*

11. Educational Qualifications

| Examinations | Board/ University | Roll No. | Year of Passing | Subjects | Marks obtd. | %age of marks |
|--|-------------------|----------|-----------------|----------|-------------|---------------|
| Matric/Hr. Sec. | | | | | | |
| 10+2 | | | | | | |
| B.A./ B.Com/ B.Sc./ BBA/ BIM/ BCA, etc. | I | | | | | |
| | II | | | | | |
| | III | | | | | |
| M.A./ M.Sc./ M.Com. etc. | I | | | | | |
| | II | | | | | |
| Any other Exam | | | | | | |
| Last exam appeared/ Passed | | | | | | |

*Tick whichever is applicable.

**Mobile No. is mandatory.

12. Have you ever been disqualified or debarred from appearing in any examination? Yes/No

If so, give particulars:

University/Board _____ Year: _____ Class: _____ Roll No. _____

13. Medium of instruction only for PGDT (H/E)/PG Dip. in JMC/MA(Mass Communication): **ENGLISH HINDI**

14. Subjects offered (See Section-V of the Prospectus)

Compulsory Subjects/Papers

Optional Subjects/Papers

| Sr. No. | Paper's Name | Paper Code | Sr. No. | Paper's Name | Paper Code |
|---------|--------------|------------|---------|--------------|------------|
| 1 | | | 1 | | |
| 2 | | | 2 | | |
| 3 | | | 3 | | |
| 4 | | | 4 | | |
| 5 | | | 5 | | |

15. Documents attached (See **Section I, Cl. 8, Pages 3-4 of the Prospectus**)

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

DECLARATION

I declare that I have carefully read the instructions/rules and regulations contained in the Prospectus and I shall abide by the same strictly. The entries made by me in this form are correct to the best of my knowledge and nothing has been concealed therein. In the event of any information found incorrect, or violation of any rule of the Directorate, my candidature shall be liable to be cancelled at any time without any notice and I shall not be entitled to refund of any fee paid by me. I am fully aware of the law regarding ragging as well as the punishment and that if found guilty on this account, I am liable to be punished appropriately. I undertake that I shall not indulge in any act of ragging.

Place _____

Countersigned

Date _____

Father/Guardian

Signature of the Candidate

FOR OFFICE USE

(i) **ELIGIBLE: Yes/Not** because _____

(ii) **Documents wanting and discrepancy** if any: _____

(iii) **Candidature cancelled due to non submission of** _____

Clerk(DE)

Asstt.(DE)

Supdt.(DE)

DR/AR(DE)

14. Details of all the examinations in which already appeared:

| Examination | Year/ Session | Roll No. | Board/ University | Subjects | Marks Obtained | Max. Marks | Result |
|-------------|------------------|----------|----------------------|----------|-------------------|---------------|--------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

15. Have you appeared in any other examination from this University or any other University simultaneously? Yes/No If yes, write particulars of all such Examinations below.

| Name of Class | Board/University | Subject in which to appear | Full Subjects/Reappear/ Improvement/ Additional |
|---------------|------------------|----------------------------|--|
| | | | |

16. Have you ever been disqualified in any exam, or any UMC registered against you, if yes, give details:

(i) Examination/Class..... (ii) Session: (iii) Exam Roll No.....
(iv) Punishment awarded.....

17. Please write one sentence each in Hindi/English in your own handwriting:

In Hindi.....
In English.....

18. I solemnly declare and affirm that the particulars given above are correct and true to the best of my knowledge and nothing has been concealed therein. I am eligible for the Examination as per rules and regulations of the University. I have consulted Syllabus, Scheme, Eligibility conditions and have gone through general rules/ instructions of Kurukshetra University, Kurukshetra, before filling it and I undertake to abide by the same in all respects.

Dated:.....

Place:

Thumb Impression

Signature of the Candidate

ATTESTATION

(To be attested by the Directorate only)

- (i) Certified that the candidate has passed the qualifying lower Examination..... for the above mentioned class under Exam Roll No..... DDE Ref. No..... in April/Sept, 20..... and is eligible to appear in the said exam.
- (ii) Certified that he/she was a bonafide student of this Directorate during the session..... to.....
- (iv) Particulars of the candidate and his/her photo are correct as per registration.

Dated:.....

Place:.....

Signature of attesting authority

With Office Seal

IMPORTANT NOTE: Incomplete Examination Form will not be entertained.

TO BE FILLED BY THE CANDIDATE

Address for Correspondence

Permanent Address

| | |
|---|--|
| Name of Class.....DDE Ref. No..... Name: _____ Father's Name: _____ Address: _____ Distt. _____ State _____ Pin Code _____ Mob.No. _____ | Name of Class.....DDE Ref. No..... Name: _____ Father's Name: _____ Address: _____ Distt. _____ State _____ Mob.No. _____ Pin Code _____ - _____ |
|---|--|

DDE Ref. No.....

Space for
affixing
**Unattested
Photograph**
of the candidate

KURUKSHETRA UNIVERSITY KURUKSHETRA

(Established by the State Legislature Act XII of 1956)

FOR STUDENT

Roll No.-cum- Admit Card

Dec. 2020/April-May 2021

Name of Exam:

K.U. Regn. No.:

Name:

Father's Name: Sh.....

College/Dept.: Directorate of Distance Education

Kurukshetra University, Kurukshetra

For office use only

Exam. Roll No.:

Centre of Exam:

Signature of Candidate:

Controller of Examinations

Note: This Admit Card is to be preserved by the candidate and shown on demand on any day of the examination.

DDE Ref. No.....

Space for
affixing
**Unattested
Photograph**
of the candidate

KURUKSHETRA UNIVERSITY KURUKSHETRA

(Established by the State Legislature Act XII of 1956)

FOR CENTRE SUPERINTENDENT

Roll No.-cum- Admit Card

Dec. 2020/April-May 2021

Name of Exam:

K.U. Regn. No.:

Name:

Father's Name: Sh.....

College/Dept.: Directorate of Distance Education

Kurukshetra University, Kurukshetra

For office use only

Exam. Roll No.:

Centre of Exam:

Signature of Candidate:

Controller of Examinations

DIRECTIONS FOR GUIDANCE OF THE CANDIDATES

Important Notes

1. This Roll Number (Admit Card) is NON-TRANSFERABLE.
2. The Roll Number (Admit Card) sent to students will be provisional and it is subject to final checking of eligibility etc.
3. Candidate must appear at the centre allotted to him/her unless otherwise specially ordered by the Controller of Examinations, K.U.K. For change of centre, apply at least 15 days before the date of commencement of examination on the prescribed form with the fee supported by the documentary proof of the ground due to which change is requested.
4. In case of any wrong statement in the Examination Form or suppressing of the facts, the candidate will be responsible for consequences which might lead to cancellation of candidature and other disciplinary action under the Rules and Regulations of the University in force, as the case may be.

Controller of Examinations

KURUKSHETRA UNIVERSITY KURUKSHETRA

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

FORM 'E'

DDE Ref No. _____

COMPUTER FORM

(This Examination Form duly filled in by the candidate IN BLOCK LETTERS must be attached with the Admission Form)

FOR CANDIDATES OF DISTANCE EDUCATION FOR THE SESSION JAN/JULY 2020

Regn No. () Roll No.

(Kurukshetra University)

(To be assigned by the University)

TO BE FILLED IN BY THE CANDIDATES BY HIS/HER OWN HANDS

1. Name of Examination: Part:
 2. Name of the Candidate
 3. Father's Name
 4. Mother's Name

Space for affixing
**Unattested
Photograph** of the
Candidate

Signature of Candidate

5. Date of Birth

| | | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| D | D | M | M | Y | Y | Y | Y |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

 Vide BD/OBC Scroll No.
 Fee Remitted: Rs..... Date

6. Examination Centre *1 2.

7. Address
 (Name/Father's Name
 May not be mentioned here)

Pin Code Mob./Phone
 District State

8. Male/Female (M/F) 9. GEN/SC/ST/BC/EWS/ESM/DFP/Transgender/Differently Abled (DA), Blind (BL)
 10. State to which you belong
 11. Subject Offered

| Sr. No. | Name of the Papers | Paper Code | Sr. No. | Name of the Papers | Paper Code |
|---------|--------------------|------------|---------|--------------------|------------|
| 1 | | | 6 | | |
| 2 | | | 7 | | |
| 3 | | | 8 | | |
| 4 | | | 9 | | |
| 5 | | | 10 | | |

12 Medium Previous Roll No. Session of Last Examination
 13 Result

I solemnly declare that the particulars filled in by me are correct and nothing has been concealed and that in case of any discrepancy found therein, I shall be responsible for the consequences.

Dated:
 Place:

Signature of the Candidate