NOT TRANSFERABLE





Application No.

UNIVERSITY

APPLICATION FOR ADMISSION TO POST - GRADUATES DIPLOMA PROGRAMME IN GYM INSTRUCTOR

[Specify the Name of Programme]

Affix Passport Size Photo Recently taken duly signed by the candidate Self Attested

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(Note: Defective application will be rejected)

1. Name in full (in block letters)	:
2. (a) Father's or Guardian's Name	:
(b) Permanent address & Phone No.	:
(c) Nationality of the candidate	:
3. Age and Date of Birth	
	Age Day Month Year
4. Sex	: M F
5. Community to which the applicant belongs to	: ST SCA SC MBC/DNC BCM BC OC
6. College where the applicant studied and highest examination passed (or) programme now studying if any	and the
7. Qualification (Proof of Xerox copy attest D)	ted) : ECLARATION
correct to the best of my knowledge. I	declare that the particulars given above are true and have filled up this application after reading all the am liable to be punished by expulsion from University tement of facts.

I agree to conform from this date to all the rules and regulations including those relating to the Hostel, if I am admitted thereto, in force at present or that may be introduced hereafter for the due maintenance of discipline at the University and I further agree to be satisfied with the amenities now offered in the academic and social life of the University: to make good any damage to furniture, apparatus or other things which may be caused by any carelessness, negligence or wantonness on

I pledge myself never to take part directly or indirectly in any political, economic, communal, subversive or any other such activities.

my part and to leave the University at any time, if I cannot carry out this undertaking.

I further pledge myself not to cause damage in any manner to the properties of the University

Should it be found that I have committed any of the above acts, I agree to receive any punishment including summary dismissal from the University and Hostel and liability for damages caused.

Date: