Sl. No. .....

CENTRAL UNIVERSITY OF ORISSA, KORAPUT

COURSE REGISTRATION CARD

(All the information required to fill in CAPITAL letter only)

Admission details :

Name of the Student :.....
(in CAPITAL LETTERS as appear in HSC [10th])

Affix a Passport size Photograph

Name of the Father :.....

Name of the Mother :.....

Date of Birth :.....Place of Birth.....

Gender (Male/Female/Transgender) :..... Religion: .....

Nationality :.....Marital Status:.....

Category (SC/ST/OBC/EWS/GEN) :.....Caste:.....

Persons with Disability, if any :.....Blood Group:.....

Green Card Holder (Y/N) :.....Single Girl Child (Y/N):.....

Scheduled Area (Y/N) :.....if Yes, Name of the Area..... .....

Any Chronic Disease :.....Parents Annual Income:.....

Father Occupation :.....Mother Occupation:.....

Foreign National :.....NCC/Scouts/ Guide:.....

Kashmiri Migrant :.....War effected Persons:.....

State of Eligibility :.....Mother Tongue:.....

Mobile Number :.....Telephone No:.....

Valid E-mail ID :.....

Bank Name :.....Bank Account No:.....

Aadhaar No. :.....

Are you employed (Yes/No) :.....(If yes, please attach NOC from the current employer)

Hostel Details :

Willing to Stay in Hostel (Yes/ No) :.....(applicable for New student registration only)

At present I am residing in the .....Hostel from.....to..... of the University.

Address Details : (Present Address)

Address :.....

City :.....Pin:.....Dist.:..... State:.....

Nearest Bus Station:.....Railway Station : .....Parents Contact No.....

Address Details : (Permanent Address)

Address :.....

City :.....Pin:.....Dist.:..... State:.....

Nearest Bus Station:.....Railway Station : .....Parents Contact No.....

Declaration

I hereby declare that the particulars furnished above are true, complete, and correct to the best of my knowledge and belief.

Date:

Place:

Signature of Student

Last Qualifying Examination Details :

Last Exam Name : .....Exam Year:.....

Board or University Name : .....Duration of Year : .....

Total Marks Obtained : .....Total Max. Marks : .....% of Marks : .....Class : .....

Course details :

Programme of Study :.....Year of Admission:.....

Name of the School :.....

Name of the Department :.....

Discipline :..... Registration No :.....

Roll No. :..... Enrolment No.:.....

Academic Year :.....Semester.....Duration.....

Subjects of Study :

Sl. No.	Subject Code	Course Title / Title of Dissertation / Thesis	Credit	Remark
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

It is verified that the student is academically eligible to register and has cleared all previous dues and allowed to register for the above courses. Fee may be accepted for the current semester.

Date:..... **Signature of the Head / Department in-Charge**

Office of the Academics

Approved by

Assistant Registrar (Academics) **Joint Registrar (Academics)** **Dean (Academics)**

Office of the Finance

The student has paid the fee of Rs.....vide receipt / challan No.....

dated.....the University copy of the receipt / challan has been retained.

Date:..... **Signature of the Section Officer (Accounts)**