

DIRECTORATE OF DISTANCE EDUCATION

(For Re-Registration Students only)

Price **Rs.20.-**

ADMISSION-CUM-EXAMINATION FORM

Session: January/July, Year

NO COLUMNS SHOULD BE LEFT BLANK

Enrolment No.: Roll No.: (To be filled by the university)

Name of Programme : Semester :

Name of the Study Centre (SC): SC Code :

- * 1. Name of the candidate :
(In block letters)
2. Father's Name :
(In block letters)
3. Mother's Name :
(In block letters)
4. SC/ST/BT/Physically Handicapped :
5. Self/Ward/Spouse of MDU Employee ; Yes/No (Attach Certificate)
6. Papers in which appearing:

Course Code	Papers

Affix a passport size photograph

7. Detail of Semester Examination in which appeared from MDU :

Semester	Roll No.	Month / Year	Result	Marks Obtained
I Semester				
II Semester				
III Semester				
IV Semester				
V Semester				

8. Whether disqualified from any Exam or any unfair means case is pending (Yes/No)
9. Bank Draft No Dated..... Amount Rs..... in favour of Finance Officer, M.D. University, Rohtak payable at SBI Branch M.D. University, Rohtak, Code No. 4734. Please write Name & Address and programme applied for on the back of the bank draft.
10. List of documents attached:
1. Attach two extra passport size photographs duly attested:

Correspondence Address:

..... (Ph. No.)

Signature of Incharge Study Centre
(With Seal)

Date:

(Signature of the Candidate)

(FOR OFFICE USE ONLY)

Whether / Not Eligible
Checked by

(Clerk)

(Assistant)

(Superintendent)

(CENTRE SUPRINTENDENT COPY)
MAHARSHI DAYANAND UNIVERSITY, ROHTAK
ADMIT-CUM-IDENTITY CARD (PROVISIONAL) FOR

IT COURSE : SEMESTER: (DDE) EXAMINATION:.....

Roll No.: (To be allotted by the University)

ENROLMENT NUMBER:
NAME & ADDRESS :
(TO BE FILLED BY THE CANDIDATE)

Paste Passport
Size Photograph
Duly attested

STUDY CENTRE CODE:
(TO BE FILLED BY THE CANDIDATE)

Signature of the Candidate

Controller of Examination

(STUDENT COPY)
MAHARSHI DAYANAND UNIVERSITY, ROHTAK
ADMIT-CUM-IDENTITY CARD (PROVISIONAL) FOR

IT COURSE:..... SEMESTER: (DDE) EXAMINATION :.....

Roll No. : (To he allotted by the University)

ENROLMENT NUMBER:
NAME & ADDRESS :
(TO BE FILLED BY THE CANDIDATE)

Paste Passport
Size Photograph
Duly attested

STUDY CENTRE CODE:
(TO BE FILLED BY THE CANDIDATE)

Signature of the Candidate

Controller of Examination

MAHARSHI DAYANAND UNIVERSITY, ROHTAK
DIRECTORATE OF DISTANCE EDUCATION
INFORMATION FOR COMPUTER USAGE
TO BE FILLED IN ENGLISH AND IN BLOCK LETTERS ONLY

Name of Study Centre :

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Study Centre Code No.:

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Exam Roll No.

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REGN.NO./ENROLLMENT No.

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(If allotted by MDU, Rohtak)

1. NAME OF EXAMINATION:

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Sem:

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Paste Black &
White Passport size
Photograph

2. Appearing in Category:

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a) F for full subjects

b) R for Re-appear only

SIGNATURE OF CANDIDATE:

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3. NAME OF CANDIDATE

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4. FATHER'S NAME: Sh.

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5. MOTHER'S NAME: Smt.

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6. PERMANENT ADDRESS

(Name/Father's Name

May not be mentioned here)

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District:

State:

Pin Code No.:

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7. SEX CODE:

M	F
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8. COLLEGE ROLL NO.

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9. i) SC/ST/BC

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ii) Handicapped

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iii) General

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iv) Blind

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v) Employed

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10. Subject Code:

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11. Medium:

E

Previous Roll No.

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12. Session/Cycle of last Exam:

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13. Result:

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Signature of the Candidate

Checked by University Officials