	KARNATAK	
	MA	ANASAGANGOTRI, MYSORE-507 006 Appl In Collaboration with
	Algol Universa	al Trust
Dista	ance Mode Face to	Face Mode Programmes 2012-2013
Appl	lication For Admission To	
Stud	dy Centre Name :	Study Centre Code :
Adm	nission Cycle: 1 st Cycle July	2 nd Cycle January
Rol	ll Number :	
	STUDENT'S PERSO	ONAL INFORMATION (PLEASE FILL IN BLOCK LETTERS)
1.	Name :	
2.	Father/Husband Name : .	
3.	Mother Name :	
4.	DATE OF BIRTH:/_ (As Per Mark Card)	/ 5. Karnataka Other State
6.	SEX: M/ F	7. NATIONALITY : Indian Non India
8.	POSTAL ADDRESS OF AF	PLICANT :
	Pin :	
9.		1) OFFICE:
	(with STD code)	(2) RESIDENCE:
10. 0	CATEGORY Tick (√) box [SC ST OBC GENERAL

V No

V co

12. Programme OPTED : 13. Programme Code:

14. Subjects/Papers in which candidate appearing

S.No	Subject Code	Subject/Paper Name

15. Qualifying Examinations Passed

Examination Passed	Board/University	Reg No. & Year of passing	Marks obtained	%Of Marks	Class Obtained

16. Applicants Profession (√) : Full Time/Part Time/Business/Agriculture/Unemployed/Housewife/Retired/ Other

17. Fee payment details

S.No	TYPE OF FEE	AMOUNT (RS.)	Fee Paid DD No:
			Dated ://
			Branch of remittance :
			Name of the Bank:
	Total		

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Declaration by the Candidate: I acknowledge to have fully read the prospectus and certify that I have understood all the provisions indicated therein. I certify that I am qualified for the Programme as indicated in the prospectus. I hereby certify that all particulars stated by me in application are true to the best of my knowledge and belief. I understand that my admission is liable to be cancelled if I suppress or distort any information furnished in my application. I understand that University reserves the right to modify/ delete the syllabi, Programme structure, rules and regulations, as and when required. I understand fees once paid will not be refunded. I understand that the University reserves the right to cancel the admission without assigning any reason.

Place: Date:

Specimen signature

1.

2.

Signature of the Applicant

Study Centre

I certify that I have personally verified the original certificates and the attached documents including DD's. I certify that the candidate fulfill the eligibility criteria as per Admission Qualification norms prescribed in the prospectus. I shall be held responsible for any kind of litigation with regards to services.

Place:

Date		Study Centre Seal	Signature of Co-ordinator
		(For Office Use Only)	
AUT Progr	amme eligibility (Prog	ramme/Semester)	
Chec	ked by	Verified By	·
-	amme eligibility (Prog	ramme/Semester)	
Note: a)		equired to attach the following docume of the Certificates/Detailed Marks Cards	
b)	Crossed DDs		
c)	Identity Card (Duly fille	ed & photograph pasted by the candidate) and attested by Study Centre co-ordinator

d) Candidates are advised to collect the candidate Copy of the Receipt for Admission from the Study Centre

Year of Admission



Roll / I.D. CARD NO.

OPEN UNIVERSITY

KARNATAKA STATE

MANASAGANGOTR, MYSORE – 570 006 APPLICATION FOR EXAMINATION

Note: i) Please read carefully the instructions given overleaf before filling up the application, as well as

instruction in the prospectus. ii) Strike off whichever is not applicable.	
Mobile No	Affix Stamp Size Photo Here
Landline No	Photo Here
Email ID	
	1

1. Name of the Candidate (In block Letters): (As in qualifying examination records)	
2. Permanent Postal Address (In block letters)	

3. Subjects / Papers for which to appear – (Compulsorily indicated Reg. No., Year and Month of passing the previous examinations, if any) ('P' for passed, 'A' for appearing)

4. Semester/Yearly/First Year Examination				Semester/Yearly/Second Year Examination						
A/P	Subject	Year & Month		A/P	A/P Subject			Year & Month		
5.	Do you belong to (mark () to which you belong)	S.C	S.T	Cat I	Cat IIA	Cat IIB	Cat IIIA	Cat IIIB	G.M	ΡH
6. Sex: Male / Female			7. Mediu	um: Engl	ish					

EXAMINATION FEE PAID BANK CHALLAN TO BE PASTED

8. Details of fees paid:								
Year	Amount Paid	Name of the Bank	Challan No.	Date				

I declare that the information furnished above by me is correct to the best of my knowledge.

Date

Place

Signature of the Candidate

Accepted / Rejected

FOR OFFICE USE ONLY

Scrutinized by

Checked by

IMPORTANT INSTRUCTIONS TO BE FOLLOWED BY THE CANDIDATES

- 01. Regarding the submission of filled in application form read the instructions printed in the exam fee circular and prospectus under the section examination.
- 02. It is Compulsory For The Candidates To Enclose Attested Xerox Copies Of The Previous Years Marks Cards Without Fail.
- 03. The examination fee paid Challan and the application along with Admission fee paid Xerox Challan should be submitted on or before the due date (without or with Admission fee as per prescribed). Otherwise, the application will not be registered for examination.
- 04. Incomplete applications are liable to be rejected.
- 05. Challan number etc. should be written in the application form in the space provided above.
- 06. Examinations fees once paid will NOT be re-adjusted / refunded under any circumstances.
- 07. Regarding the rates of examinations fees, separate circular is enclosed and also see the prospectus.
- 08. For all instructions pertaining to examinations Dates, Centres, Assignments, Time table, Announcement of Result. Convocation Dates etc., please see the KSOU Website: **www.ksoumysore.co.**
- 09. KSOU website is updated continuously. Kindly enter the website often to get all and recent information regarding the examination.
- 10. Place in which examinations will be held shall be notified 25 Days prior to examination in the KSOU website. KSOU shall make all efforts to reach the students through post. However, KSOU is not responsible for postal delay.
- 11. The filled in application should be submitted to the Registrar (Evaluation), Karnataka State Open University, Manasagangotri, Mysore 570 006.