



# INDUS INTERNATIONAL UNIVERSITY

Creating futures,  
Changing lives

Bathu (Near Tahlwal), District Una, Himachal Pradesh, India

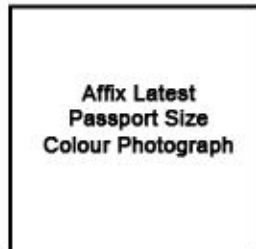
**INR 750/-**

## ADMISSION FORM

**S.No:**

NOTE: Please fill in the form in your own handwriting with Blue or Black ink in CAPITAL LETTERS

- Course Name \_\_\_\_\_
- Applying for \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_
- Session \_\_\_\_\_ Semester \_\_\_\_\_
- Name of Candidate Mr. / Ms. \_\_\_\_\_
- Father's Name / Husband's Name \_\_\_\_\_ Mobile No. \_\_\_\_\_
- Mother's Name \_\_\_\_\_
- Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (DD/MM/YYYY) Birth Place \_\_\_\_\_ Blood Group \_\_\_\_\_
- Nationality:  Resident Indian  Non-Resident Indian  Foreign Passport Holder from \_\_\_\_\_
- Category (Caste)(of Indian resident):  SC  ST  OBC  General
- Domicile of HP:  YES  NO
- Correspondence Address \_\_\_\_\_



Tel. No. \_\_\_\_\_ Mobile No. \_\_\_\_\_ Email ID \_\_\_\_\_

Gender: Male  Female

12. Is your family income below INR 1 lac per annum?  YES  NO

13. Are you physically challenged?  YES  NO

### 14. Qualifications

Name of the Examination	Board / University	Year of Passing	Subject	School / College Attended	% Age / Div
10 or equivalent					
10 + 2					
Graduation					
Post Graduation					

15. Achievements / Awards \_\_\_\_\_ 16. Extra curricular activities \_\_\_\_\_

(write on an extra sheet, if needed)

### 17. Accommodation:

Will you be requiring Accommodation assistance?  YES  NO

18. Will you be requiring Transport Facility?  YES  NO

### DECLARATION

I hereby certify that the information given in the application is complete and true to the best of my knowledge. I understand and agree that misrepresentation or concealment of facts will justify the denial of admission / cancellation of admission / expulsion and / or initiation of proceeding under appropriate sections of Indian Penal Code. I have read and do hereby agree to the terms and conditions for admission.

I pledge to abide by the all rules and regulation of Indus International University. I fully understand that any contravention or breach of the same may result in penalties like expulsion from the University, being imposed on me

Name of candidate \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent / Guardian's Endorsement

I agree with the above & take full responsibility of my son / daughter / ward and pay all his/her dues, till the completion of Course.

Place..... Signature.....

Date..... Parent / Guardian's Name.....

### Admission Cell

Form No. \_\_\_\_\_ Date \_\_\_\_\_ Reference \_\_\_\_\_