



**ADIKAVI NANNYA UNIVERSITY
DIRECTORATE OF ADMISSIONS
RAJAMAHENDRAVARAM , A.P.**

UGC-NATIONAL SKILLS AND QUALIFICATION FRAMEWORK PROGRAM

Affix Recent
Photograph

Applied for the Course of :

Details of Demand Draft:

Amount	D.D.No	Date	Name of the Bank
500/-			

1.(a) Applicant's Name:

(b) Father's Name :

(c) Mother's Name :

(d) Mobile No : _____ E-mail ID: _____

2. Date of Birth

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Age: (Y/M/D)

3. Place of Birth Place: _____ District: _____

4. (a) Nationality _ _____ (b) Religion _ _____ (c) Gender: _____

(d) Aadhar No: _____

5.(a) Address for Communication

(b) Permanent Address

6. Reservation Category, if any (put ✓ mark), (enclose an attested copy of recent Caste Certificate issued by the competent authority).

SC	ST	BC- A	BC- B	BC- C	BC -D	BC -E	PH (OH/HH/V H)	OC EWS/EWS(K)	Any other

7. Academic Qualifications: (Enclose true copies of the Certificates)

Examination	Course Name	Subjects Studied	Year of Passing	Division	Grade/ % of Marks	Name of the Board/University
Postgraduate						
Degree						
Intermediate						
SSC						

Others:

Academic Distinction, if any (Prize, Medals, etc):

8. Additional information, if any, the candidate

Wishes to provide in support of his/her application

DECLARATION

I hereby declare that the information provided here with is true to the best of my knowledge and belief. At any stage if it is found that the particulars furnished by me is/are false, my admission can be cancelled.

Place:

Date:

SIGNATURE OF THE APPLICANT:

Name: