



Bundelkhand University, Jhansi

Sr. No. _____

APPLICATION FOR DIRECT ADMISSION 2009

(Application form to be filled in capital letters only)

1. Name of the CourseCourse Group code
2. Name of the Candidate _____
3. Father's Name _____
4. Mother's Name _____
5. Sex (M/F)___ 6. Date of Birth ___/___/___ Nationality _____
7. Postal Address _____

Affix self attested
Passport size
Photograph

Pin _____ Phone _____

8. Category : UR. SC OF U.P. ST OF U.P. OBC OF U.P.
Ward of Defence Personnel Physically Handicapped Freedom Fighter
9. Qualifying exam passed from BU/BU Territory. Yes No

10. Educational Qualification

Examination	University/Board	Year	Percentage of Marks	Subjects

11. Details of Qualifying Examination :

Examination	University/Board	Year	Percentage of Marks	Subjects

NOTE

- A. Application form completed in all respects in a candidate's own handwriting must reach the office of the Director (SFS) Bundelkhand University, Jhansi-UP-284128 by June 22, 2009 without late fee and by July 01, 2009 with late fee of Rs. 200/-.
- B. Copies of Certificates and marksheet should be attached with the application form. Original certificates are to be produced at the time of Counselling/Admission.
- C. Percentage of marks obtained should be clearly written in the space provided.
- D. Students of Bundelkhand University in case of admission to PG Courses, and of BU Territory (Intermediate colleges situated in Districts of Jhansi, Banda, Chitrakoot, Mahoba, Jalaun, Hamirpur and Lalitpur) in case of Undergraduate Course will be given an additional weightage of 15% of the percentage of marks obtained by them in qualifying examination.
- E. University reserves all the rights regarding admission to various courses offered under the Direct Admission.

DECLARATION BY THE CANDIDATE

I have read the Academic Brochure and the information Booklet and have noted its contents and directions for admission. I certify that the particulars furnished by me are true to the best of my knowledge and belief. If any information is found to be incorrect/false, my admission should be cancelled.

Parent's/Guardian's Signature

Candidate's Signature

FOR OFFICE USE ONLY TO BE FILLED AT THE TIME OF COUNSELLING

Name of the Applicant _____

Percentage of Marks obtained Percentage Checked by _____