



तमिलनाडु केन्द्रीय विश्वविद्यालय

(संसद द्वारा पारित अधिनियम 2009 के अंतर्गत स्थापित)

CENTRAL UNIVERSITY OF TAMIL NADU

(Established by an Act of Parliament, 2009)

तंजावुर रोड/Thanjavur Road, तिरुवारूर/Thiruvavur - 610 004

☎: 04366 – 277261, ☎: 04366 - 277337

Note: All entries in this form should be legibly made by the student in his / her own handwriting in pen. No Column should be left blank.

ENROLMENT FORM

ADMISSIONS – 2017-2018

Affix latest
Passport Size
Photograph here
and sign across the
photograph

Registration Number*:

(*To be given by the Office)

Programme in which the

admission is granted: _____

Subject: _____

Department: _____ School: _____

1. Name of the Student: _____

(In **BOLD** letters as in the HSC records)

2. Date of Birth: _____

Nationality: Indian/ Foreign National

Sex: Male/Female

Marital Status: Married/Unmarried

State of Domicile

Whether SC/ST/PH/OBC? If yes, state the category

3. Father's Name: _____

Occupation: _____

Annual Income: Rs. _____

4. Mother's Name: _____

Occupation: _____

Annual Income Rs. _____

5. Guardian's Name: _____

Occupation: _____

Annual Income Rs. _____

(If both the parents are not alive)

6. Native Place: _____

District: _____

State: _____

Distance from Thiruvavur: _____ (in KM)

Nearest Railway Station: _____

7. Academic Record from Matriculation onwards:

Examination Passed	Name of the University/Board	Subjects Studied and Passed	Month & Year of Passing	Percentage
Matriculation/SSC				
Intermediate/HSC (10+2)				
Bachelor's Degree BA/B. Sc./B. Com				
Master's Degree MA/M. Sc/M.Com				
M. Phil / M. Tech				
Any other Degree / Diploma / B.E / B. Tech / MCA etc.				

Note: Attested copies of all the certificates are to be furnished at the time of admission along with the original certificates.

8. Were you in receipt of any scholarship or any other financial support during your previous study? If so, provide details of the same: _____

9. Details of previous employment, if any:

Organization and Address	Position Held	From	To	Nature of Duties

If in service at present, enclose a conduct certificate from your employer and a "No Objection Certificate" for pursuing studies in the Central University of Tamil Nadu.

10. Do you require Hostel Accommodation? Write Yes or No

11. Do you belong to any minority community? If yes, state the following:

Community: _____ Religion: _____

12. (a) Was any disciplinary action taken against you in your academic career? Yes/No. _____

If yes, provide details _____

(b) Were you ever convicted by a Court of law on criminal or other charges? Yes/No. _____

If yes, give details _____

13. Any other relevant information _____

14. Permanent Address:

Present Mailing Address:

PIN:
Tel No.
E-mail:
Mobile No.:

PIN:
Tel No.
E-mail:
Mobile No.:

15. Declaration by the Student

I hereby declare that the information furnished by me in this enrollment form and in the documents enclosed are true, complete and correct. In case any information is found to be false or incorrect at any time, it shall entail cancellation of my admission, and shall also render me liable to such action as the University may deem fit. In the event of any medical or other emergency, my parents / guardian may be contacted at the address given above.

Place:

Date:

Signature of the Candidate

16. Declaration by the Parent/Guardian

My son/daughter/wife/ward Sri/Smt/Kumari _____

is provisionally admitted to the University. I hereby undertake that I shall be responsible for payment of all his/her fees and other charges and shall reimburse in full any emergency, medical or other expenses, if incurred by the University. In case any information in this form and the documents enclosed are found to be false or incorrect at any time, it shall entail cancellation of my son's/daughter's/wife's/ward's admission, and shall also render him/her liable to such action as the University may deem fit. I will be responsible for his/her good conduct and behaviour

during the period of his/her stay in the University. Further, I may be contacted in the event of any emergency as determined by the University.

Place:

Signature:

Date:

Full Name:

Relationship with the student:

Telephone No. /Mobile No.:

Note: The signature of the parent in the application form and this enrollment form will be considered as basis for all verification purposes in the University.