

Permanent Address :

Address for Communication :

PIN:		PIN:	
Mobile No		Mobile No	
Tel No		Tel No	
Email		Email	

Educational Background :

Qualification	Year of Passing	Reg No.	% of Marks Obtained	Class Obtained	Board / University	Electives
X std.						
Intermediate						
Degree						
Post Graduation						
Entrance Examination						

Name of the Institution last studied	Date of Admission	Date of Leaving

Identification Marks:

- 1.
- 2.

Fee Paid :

DD No.	Date	Amount	Bank & Branch

Note: Enclosures with filled-in application.

- Photocopy of the certificate of the qualifying examination passed.
- Three copies of recent photograph (passport size) of the candidate (One to be affixed to the application and the remaining to be enclosed).
- Demand draft for total fees in favour of CDL-GITAM University, payable at Visakhapatnam.
- Photocopy of date of Birth extract.

Declaration

I hereby declare that all the information given above is true and I fully understand that my admission stands cancelled at any stage if any information supplied by me is found to be false and inadequate. Further, I promise to be a disciplined student and abide by the orders issued from time to time by the authorities of CDL, GITAM.

Place:

Date:

Signature of the Applicant