

\* Filled-in application to be returned on / before 28-02-2020



**GITAM (DEEMED TO BE UNIVERSITY)**  
(Estd. u/s 3 of the UGC Act., 1956)  
**CENTRE FOR DISTANCE LEARNING**  
(Approved by the Joint Committee of UGC-AICTE-DEC)  
Recognised by the Distance Education Bureau (DEB), UGC, New Delhi

**ADMISSION APPLICATION FORM**

ID No.

(For office use only)

Details :

<b>PROGRAMME</b>		Candidate's Latest Photo
<b>B.A / B.Com. only</b> i) Second Language	<input type="checkbox"/> Telugu <input type="checkbox"/> Hindi <input type="checkbox"/> Sanskrit <input type="checkbox"/> Spl. English	
ii) Medium	<input type="checkbox"/> TELUGU <input type="checkbox"/> ENGLISH	
<b>B.A. only</b> iii) Electives / Specialization	<input type="checkbox"/> History, Public Administration, Sociology (HPS) <input type="checkbox"/> Politics, Public Administration, Sociology (PPS) <input type="checkbox"/> History, Economics, Psychology (HEP)	
<b>MBA General only</b> Elective in Third Year	<input type="checkbox"/> General <input type="checkbox"/> HRM	

Personal Information :

Aadhar No :

Full Name (as entered in any earlier certificate)	
Name of the Parent / Guardian	
Date of Birth (dd-mm-yyyy)	

Socio-Economic Details :

Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others    If others, Specify :
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried
Social Status	<input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> BC <input type="checkbox"/> PH <input type="checkbox"/> Others
Area	<input type="checkbox"/> Rural <input type="checkbox"/> Urban
Employed	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please furnish Work Experience (if employed) :

Organisation	Designation	Salary (p/m)	Total Service
<input type="checkbox"/> Govt. <input type="checkbox"/> Private	<input type="checkbox"/> Managerial <input type="checkbox"/> Clerical <input type="checkbox"/> Self-Employed		

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