



APPLICATION FORM  
SS INTERNATIONAL UNIVERSITY

Course Details:

Name of the Corurse applied for: \_\_\_\_\_

Session (Duration of the course): \_\_\_\_\_

Specialization (if any): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student Details:

Name in full Shri/ Smt/ Kum: \_\_\_\_\_

\_\_\_\_\_

Father's Name:

\_\_\_\_\_

Mother's Name:

\_\_\_\_\_

Address for Correspondence:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Pin \_\_\_\_\_

\_\_\_\_\_

Telephone No:

\_\_\_\_\_

Mobile No:

\_\_\_\_\_

E-mail ID:

\_\_\_\_\_

Permanent Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Pin \_\_\_\_\_

\_\_\_\_\_

Marital Status: Married ( ) Unmarried ( ) Others ( please specify) ( )  
(Please tick whichever is applicable)

Date Of Birth (DD/MM/YY)

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Gender: Male( ) Female( )  
(Please tick whichever is applicable)

Whether you belong to SC/ST/OBC/Handicapped/Army Personnel/War Widow Children  
(Please enclose attested copy of the document)

( Yes / No )

Photograph

Educational Qualifications: (Please enclose attested copy of the document)

Degree	Name of Institution	University/Board	Month and Year of passing	Percentage (%)

Any other qualifications, please specify:

Experience Details:

Name of Employer	Date of Joining	Date of Leaving	Designation	Nature of Work

Examination Options:

Classroom System: (   ) Online Test (   ) Exam From Home (   )

Fee Payment Options:

Declaration:

I, \_\_\_\_\_, Son/Daughter of \_\_\_\_\_, hereby declare that all the statements made in this application are true/correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect; my candidature for said programme is liable to be cancelled/rejected at any stage without giving any notice to me.

*I declare that I have checked the university's website for complete details in respect of admission criteria, duration, fee, affiliations (memberships), examinations, etc. before applying to the course opted for. I also agree that in case of withdrawal / cancellation / rejection from the course applied, my fee will not be refunded/adjusted.*

Date:

Place:

(Signature of the Applicant)

For Office Use only:

Name of the Counsellor:

Documents Attached:

- A Latest CV or Resume
- Photocopy of Academic certificates
- Two references
- Three passport Size Photographs
- A non-refundable application fee

Received by:

Students' enrollment No.:

Date of admission:

Fee details:

Remarks, if any:

Date:\_\_\_\_\_

Sign. Office Bearer