



INSTITUTE FOR AYURVED STUDIES & RESEARCH
FACULTY OF AYURVEDA

SHRI KRISHNA AYUSH UNIVERSITY, KURUKSHETRA

Application for the Admission in Short Course on Ayurved and Aahar (for Women)

(Incomplete and late application forms will not be considered for admission)

IMPORTANT NOTES:

Attested copies of the documents must be attached with the application form.

Particulars to be filled by the candidate in block (capital) Letters:

- Name** : _____
नाम : _____
 - Father's Name** : _____
पिता का नाम : _____
 - Mother's Name**: _____
माता का नाम : _____
 - Nationality/ नागरिकता**: _____
 - Date of Birth / जन्म तिथि** : _____
 - Gender / लिंग**: **Female**
 - Blood Group** _____
 - Marital Status / वैवाहिक स्थिति** : **Married** / **Unmarried**
9. **Email Address / अनु डाक पता**: _____
10. **Aadhar No.** _____
11. **Contact No.** _____ (Mobile No.) **Alternate Contact No.** _____

| |
|---|
| Affix latest passport size photograph |
| Sign within box |

12. Address for correspondence:

Village; _____ **Post Office:** _____
Tehsil: _____ **District:** _____ **State;**
_____ **Pin Code:** _____

13. Permanent Address:

Village; _____ **Post Office:** _____
Tehsil: _____ **District:** _____ **State;**
_____ **Pin Code:** _____

14. Details of Academic Qualification

| S r No. | Exam Passed | Name of School | Name of Board / University | Year of Passing | R o l l No. | Subject | M a r k s Obtained / T o t a l Marks | % of total m a r k s obtained |
|---------|-----------------------------|----------------|----------------------------|-----------------|-------------|---------|--------------------------------------|-------------------------------|
| 1. | 10 th | | | | | | | |
| 2. | H i g h e s t Qualification | | | | | | | |

15. List of Documents attached :

- Aadhar Card
- 10th DMC (DOB Proof)

Dated

Signature of the Applicant

Undertaking

- a) I _____ (candidate) Daughter of _____ and resident of village /town/city of _____ Tehsil _____ Distt. _____ of _____ (State) do hereby solemnly declare that the information given in the application form is absolutely correct and true to the best of my knowledge and I have not hidden any relevant information.
- b) If any time subsequent to my admission, it is discovered that any information given in the application form or in the attached certificate/documents produced is false. I may be removed from college/university and all dues paid by me may be forfeited.

Dated
the Applicant

Signature of

:: For Office Use ::

Application Accepted _____

Signature of Course Coordinator

Batch No. _____

Fees Details:

Receipt Number

Dated

Amount

Attendance

1st Month

2nd Month

3rd Month

Signature of Official