(vide U.P. Act No.1 of 2014 as passed by State Legislature and recognized by UGC U/s 2(f))

	Faculty of				
	Registration Form for Semeste	r (2019-20)			
Name of Student					
Roll No	Aadhar No_				
Name of Course	Branch	Semester			
Date of Birth/	Date of Joining (Inst.)				
ReligionC	CategoryRe	eserved Category (Y/N)			
Physically Handicapped (Y/N)	Econ Backward (Y/N)			
Student Contact No.					
Father's Name	Mother's Name				
Contact No. (Father)					
Permanent Address					
Name of Local Guardian					
Contact No.					
Local Address					
Hostler/Day Scholar					
In case of Hostler Hostel Nan	ne	Room No			
Status of the Institute Fee/Dues					
Marks (In %) 1 st Year	2 nd Year	3 rd Year			
E-mail (Student)					
Registration Date					
Signature of Applicant	H.O.D	Account Officer	Academic Office		
Note:-Please registered you	urcolf on wayy antirogging	in on Pama University	, Dortal		
NotePlease registered you	arsen on <u>www.antiragging.</u>	iii on Kama omversity	r Portai.		
	REGISTRATIO	ON SLIP			
Mr. /Ms					
CourseSemester	_Branch	RollNo			
Status of the Institute Fee/Dues					
Has been registered on dated	se	ssion			

Signature of Applicant H.O.D Account Officer Academic Office

(vide U.P. Act No.1 of 2014 as passed by State Legislature and recognized by UGC U/s 2(f))

PARENT'S UNDERTAKING FOR STUDENTS ATTENDANCE

I	Father/Mo	other of	
, am	aware that as per	Rama University Rules, my ward has	to
attain a minimum of 75% a	ttendance during e	each semester of his Course/Program	in
Faculty of			
•	•	will mainta	
the minimum attendance of	75% in all semester	r , failing which/ he/she will be debarre	ed
from appearing Mid Term 8 Kanpur.	& End Term Exami	inations conducted by Rama Universit	ty,
Name of the Student	•		
Name of Parent/Guardian	:		
Address	·		
Contact No/Mobile	·		
Email Id	·		
Signed at	, this	Day of January, 2020	
(Place)	(Date)		
			—

Signature of Father/Mother