(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 Semester.	((2019-20)		
Name of Student						
Roll No.	Aadhar No					
Name of Course	Branch	Semester_				
Date of Birth/	/Da	te of Joining (Inst.)				
Religion	_Category	Res	served Categor	ry (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.					<u></u>	
Local Address						
Hostler/Day Scholar						
In case of Hostler Hostel N	ame		_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 Offi	
Note:-Please registered ye	ourself on <u>wv</u>	vw.antiragging.ii	<u>1</u> on Rama l	Jniversity P	ortal.	
		REGISTRATION	N SLIP			
Mr. /Ms		S/O/D/O				
CourseSemester_	В	Branch	RollNo			
Status of the Institute Fee/Dues						
Has been registered on dated		ses	sion			

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/Mother of				
	aware that as per Rama University Rules, my ward has to tendance during each semester of his Course/Program in				
•	hat my wardOf d batch will maintain				
	75% in all semester , failing which/ he/she will be debarred & End Term Examinations conducted by Rama University,				
Name of the Student	·				
Name of Parent/Guardian	······				
Address	<u>:</u>				
Contact No/Mobile	:				
Email Id	:				
Signed at	this Day of July, 2019				
(Place)	(Date)				

Signature of Father/Mother