



KARNATAKA STATE OPEN UNIVERSITY

MANASAGANGOTHRI, MYSORE – 570 006

AND

SHARADA VIKAS TRUST®

JAYANAGAR, BANGALORE – 560 011

ATTACH HERE
STAMP SIZE
PHOTOGRAPH
DO NOT DEFACE
IT BY
SIGNATURE OR
RUBBER-
STAMPING

RE-REGISTRATION FOR THE COURSE _____ SEMESTER/YEAR _____

(Name of the course to be filled)

20 _____ 1st/2nd Cycle

Application No.(Computer Generated): _____

(Please read carefully **IMPORTANT INSTRUCTIONS TO APPLICANTS** before filling-up.
No column should be left unfilled. Write neatly.)

Study Center Code: _____

Name of the Study Center: _____

Roll Number : _____

1.NAME OF THE APPLICANT: _____

(As in Marks Card; Any change to be authenticated).

2.Father's/Guardian's Name(Relationship) : _____

3.Date of Birth: _____

4 . Sex: Male / Female

5. SC/ST/OBC/PH-(Physically Handicapped) Attach Proof: _____

6.Correspondence Address : _____

PIN: _____

7.Communication Numbers Mobile: _____ E-mail: _____

(Should not be left Blank)

(Should not be left Blank)

8. (Should not be left Blank)

Sl. No.	Subject Code	Subject
1.		
2.		
3.		
4.		
5.		
6.		

Note: Application with “No” subject information will be “**Rejected**”

9.DD PARTICULARS:(a) In favour of **Sharada Vikas Trust.**, Payable at Bangalore.(DD for KSOU)

Crossed D.D. No.: _____ Dated: _____ Amt. Rs.: _____

Name and Place of the Bank: _____

(b) In favour of **Sharada Vikas Trust.**, Payable at Bangalore.(DD for SVT)

Crossed D.D. No.: _____ Dated: _____ Amt. Rs.: _____

Name and Place of the Bank: _____

(Rs. _____ without Penal fee & Rs. _____ with Penal fee, for late submission)

The following details on the back of the Bank Drafts have to be written :

Name, Application No., Study Center Name and Course and Sem applied for.

NOTE: For fee details refer prospectus.**STUDY CENTER****Verified the filled-in Application, including DDs.**

(Seal of Study Center)

Authorized Signatory of Study Center

(FOR OFFICE USE ONLY)**SHARADA VIKAS TRUST**

Course Eligibility(Programme/Semester) _____

Verified by _____

Checked by _____

Authorized Signature with seal

KSOU

Course Eligibility(Programme/Semester) _____

Verified by _____

Checked by _____

Authorized Signature with seal

Note:**1. Candidates are advised to collect the 'Student Copy' of the Receipt for Admission from the Study Centers, as it is their only proof for having submitted the application.****2. Staple the copies of documents keeping them in the following order: DDs/Admission Form.****Declaration: I have carefully gone through the prospectus and agree to abide by the Rules & Regulation of the University. I also authenticate and take responsibility for all my Certificates furnished by me.****Date:****Signature of the candidate**



KARNATAKA STATE OPEN UNIVERSITY

&

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STUDENT COPY
(to be given to the student)



Receipt for Admission Form

Name of the Study Center _____ Date _____

Received Fresh/Re-Registration Admission Form for Course _____ Semester for 20 _____ 1st/2nd Cycle

Name & Address of the Candidate _____

Phone No. _____ Email _____

DD Particulars

1. In favour of **Sharada Vikas Trust.**, Payable at Bangalore.(DD for KSOU)

Name and Place of Bank _____ DD No. _____

Dated : _____ Amount _____

2. In favour of **Sharada Vikas Trust.**, Payable at Bangalore.(DD for SVT)

Name and Place of Bank _____ DD No. _____

Dated : _____ Amount _____

Enclosure: Certificates (_____ No's) DDs , Stamp-size Photographs (1 nos.)

Signature of the Student _____ (to be filled by Student) Authorized Signature of SC _____



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&

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STUDY CENTER COPY
(to be retained by Study Center)



Receipt for Admission Form

Name of the Study Center _____ Date _____

Received Fresh/Re-Registration Admission Form for Course _____ Semester for 20 _____ 1st/2nd Cycle

Name & Address of the Candidate _____

Phone No. _____ Email _____

DD Particulars

1. In favour of **Sharada Vikas Trust.**, Payable at Bangalore.(DD for KSOU)

Name and Place of Bank _____ DD No. _____

Dated : _____ Amount _____

2. In favour of **Sharada Vikas Trust.**, Payable at Bangalore.(DD for SVT)

Name and Place of Bank _____ DD No. _____

Dated : _____ Amount _____

Enclosure: Certificates (_____ No's) DDs , Stamp-size Photographs (1 nos.)

Signature of the Student _____ (to be filled by Student) Authorized Signature of SC _____