



(Please fill the form clearly and in capital letters.)

Roll No.

Applicant's Signature

- | | | | |
|------------|--|---|--|
| 1. | Applicant's Name (as in High School Certificate) <i>(Leave space in between First, Middle and Last Name)</i> | | <div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 100px; height: 50px; margin: 0 auto;"></div> |
| | | | |
| 2. | Father's Name | | |
| 3. | Mother's Name | | |
| 4. | Date of Birth | <div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</div> </div> | 5. Gender <div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</div> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">F</div> </div> |
| | | 6. Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Seperated <input type="checkbox"/> | |
| 7. | Permanent Address | | |
| | | | |
| | District | | State |
| | PIN/ZIP Code | | Country |
| | | Police Station | |
| 8. | Correspondence Address - <i>(Tick, if same as above)</i> | | |
| | | | |
| | District | | State |
| | PIN/ZIP Code | | Country |
| | | Police Station | |
| 9. | Landline No. | | Mobile No. |
| | | | |
| 10. | Email ID | | |
| | | | |
| 11. | Category - A: | | |
| | General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> <i>(Enclose Certificate for category other than General)</i> | | |
| 12. | Category - B: | | |
| | Ex Army Dependent <input type="checkbox"/> Handicapped <input type="checkbox"/> Freedom Fighter's Dependent <input type="checkbox"/> <i>(Enclose Relevant Certificate)</i> | | |
| 13. | Aadhaar Card No. | | |
| | | | |
| 14. | Nationality | | |
| | | | |
| 15. | Region: | | |
| | Urban <input type="checkbox"/> Rural <input type="checkbox"/> | | |
| 16. | Religion: | | |
| | Hindu <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Christian <input type="checkbox"/> Others <input type="checkbox"/> | | |
| 17. | Course Applied: | | |
| | Code <input type="text"/> <input type="text"/> <input type="text"/> Name <input type="text"/> | | |

(Continued)

18. If participated in NSS ☐ NCC (B, C or G part 1, 2) ☐ Sports ☐ Bhartiya Sanskriti Gyan Pariksha ☐ (Enclose Relevant Certificate)

19. Centre Code for the Entrance Examination
First Preference Second Preference (Please refer to the Prospectus/Website for centre code details.)

20. Educational Qualification (Enclose Attested Mark Sheets)

Qualification	Board/ University	Year	Total Marks	Obtained Marks	Marks in %	Subject(s)
High School						
Intermediate						
Graduation						
Post Graduation						
Others						

21. Entrance Paper Choice [For B.Ed. Applicants only] [A] Hindi ☐ English ☐ [B] Arts ☐ Science ☐ Commerce ☐

22. Mode of Payment: Cash ☐ Demand Draft ☐

Receipt/DD No. Date Amount Bank

23. Where did come to know about DSVV?

- ☐ Publications (Akhand Jyoti/ Yug Nirman Yojana/ Pragya Pakshik)
- ☐ University visit
- ☐ Newspaper Advertisement
- ☐ TV/ Radio advertisement
- ☐ Website/ Social media
- ☐ Internship Programme
- ☐ Event of Gayatri Parivar
- ☐ Any other source

DECLARATION

I do hereby declare that the information and record(s) submitted as indicated above is true and correct to the best of my knowledge and belief.

I also hereby agree that my candidature may be rejected in case any of the information/record(s) furnished above found to be incorrect or false and I will abide by the decision of the Admission Committee in rejecting my candidature.

Date: _____ Place: _____ (Signature of Applicant)