

DIRECTORATE OF DISTANCE EDUCATION

(For Re-Registration Students only)

Price **Rs.20.-**

ADMISSION-CUM-EXAMINATION FORM

Session: January/July, Year

NO COLUMNS SHOULD BE LEFT BLANK

Enrolment No.: Roll No.: (To be filled by the university)

Name of Programme : Semester :

Name of the Study Centre (SC): SC Code :

- * 1. Name of the candidate :
(In block letters)
2. Father's Name :
(In block letters)
3. Mother's Name :
(In block letters)
4. SC/ST/BT/Physically Handicapped :
5. Self/Ward/Spouse of MDU Employee ; Yes/No (Attach Certificate)
6. Papers in which appearing:

Course Code	Papers

Affix a passport size photograph

7. Detail of Semester Examination in which appeared from MDU :

Semester	Roll No.	Month / Year	Result	Marks Obtained
I Semester				
II Semester				
III Semester				
IV Semester				
V Semester				

8. Whether disqualified from any Exam or any unfair means case is pending (Yes/No)
9. Bank Draft No Dated..... Amount Rs..... in favour of Finance Officer, M.D. University, Rohtak payable at SBI Branch M.D. University, Rohtak, Code No. 4734. Please write Name & Address and programme applied for on the back of the bank draft.
10. List of documents attached:
1. Attach two extra passport size photographs duly attested:

Correspondence Address:

..... (Ph. No.)

Signature of Incharge Study Centre
(With Seal)

Date:

(Signature of the Candidate)

(FOR OFFICE USE ONLY)

Whether / Not Eligible
Checked by

(Clerk)

(Assistant)

(Superintendent)

(CENTRE SUPRINTENDENT COPY)
MAHARSHI DAYANAND UNIVERSITY, ROHTAK
ADMIT-CUM-IDENTITY CARD (PROVISIONAL) FOR

IT COURSE : SEMESTER: (DDE) EXAMINATION:.....

Roll No.: (To be allotted by the University)

ENROLMENT NUMBER:
NAME & ADDRESS :
(TO BE FILLED BY THE CANDIDATE)

Paste Passport
Size Photograph
Duly attested

STUDY CENTRE CODE:
(TO BE FILLED BY THE CANDIDATE)

Signature of the Candidate

Controller of Examination

(STUDENT COPY)
MAHARSHI DAYANAND UNIVERSITY, ROHTAK
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