



UNIVERSITY OF JAMMU
INTERNATIONAL STUDENTS CENTRE
APPLICATION FORM FOR ELIGIBILITY /
ADMISSION

Application form No: _____

DEAN, ACADEMIC AFFAIRS
University of Jammu
JAMMU – 180006

I hereby apply for grant of eligibility and admission as an International Student to _____ Degree course during the Academic year _____ and request you to kindly grant me a certificate of eligibility and admission to the said course in Your University. I submit my particulars as under.

Name in Full: (In Capital letters)

Address:

City _____ Province / State _____ Country _____

Postal Code _____ Telephone _____ E-mail _____

Nationality: _____ **Sex:** Male _____ Female _____

Date of Birth (dd/mm/yy): _____

Marital Status: Married _____ Single _____

Name of the course to which admission is sought: _____

Educational Qualifications

1. Name/ Title of the Last Examination Passed:

2. Name of the Examining Body:

(Whether University or Board) _____

3. Passed XII std. Examination **with English** as one of the passing subjects : Yes / No

Name and Address of the School / college / Institution last attended

Copies of the certificates / Documents attached:

1. _____

2. _____

3. _____

4. _____

Declaration and Undertaking:

I hereby declare that I have carefully read this application form for eligibility / admission and have noted the instructions / requirements therefore. I have also carefully noted the rules of eligibility and conduct and discipline laid down by the University and I agree to abide by them. I understand and declare that I shall be responsible for any discrepancies, error, wrong or incorrect information supplied by me in this application form and for cancellation of admission therefore or otherwise found ineligible. I undertake to furnish the necessary certificates / papers in original along with a true copy of each of them as and when asked for, failing which I understand that my eligibility and admission stands automatically cancelled and that the University is not responsible for the same. I hereby declare that the information given in this form is true and correct to the best of my knowledge and belief.

Date: _____

Yours Faithfully

Signature of the Student

(The part below is For Office Use Only)

CASE PAPER

(To be filled in by the office of the University)

PART ONE

Name _____

Nationality _____ R. No. _____

Class _____ Faculty/ Department _____

Academic Year _____ Amount of Eligibility Fee _____

Receipt No. & Date _____

Case Prepared by _____ Date: _____

PART TWO**SCRUTINY**

| <i>Nature of the Discrepancy</i> | <i>Informed On</i> | <i>Compiled On</i> |
|----------------------------------|--------------------|--------------------|
| Medical Fitness Certificate Fee | _____ | _____ |
| Proficiency Test in English | _____ | _____ |
| Proper Visa | _____ | _____ |

Date: _____ Scrutinized by _____

PART THREE

Case finalized on ____/____/____

ADMITTED

NOT ADMITTED