

Registration No.



Sl.No.

**MANIPUR UNIVERSITY
CANCHIPUR, IMPHAL - 795003**

Affix
Passport
Size
Photograph

**Application for Admission to One Year Certificate Course in
Chinese/Germany/Spanish/French/Japanese Language (2017-18)**

*(To be filled in duplicate)
(Form must be fill up with Blue or Black ink ball pen)*

1. **Name in full (in Block Letters)** :
2. **a) Father's/Guardian's name** :
b) Mother's Name :
3. **Permanent Address (in Block Letters)** :
Pin Code State.....
Cell Phone No.
- E-mail address**.....
4. **Present Address (in Block Letters)** :
Pin Code State.....
5. **Date of birth** : Date..... Month..... Year
6. **a) Male/Female** :
b) Blood Group* :
7. **i) Nationality** :
ii) Country, if Foreign National :
8. **State of Domicile** :
9. **Special categories of students** :

If you belong to :

	Category	Code No.
a) Any one of the Special Categories* Please write SC(Code-1)/ST(Code-2)/ OBC (Code-3) as applicable or leave blank
b) Defence Service Personal Please write DF(Code-4)*
c) Persons with disabilities, Please write PWD(Code-6)*
d) NSS/NCC(C Certificate) Please write NSS/NCC (Code-7)*
e) Sports/Extra Curricular Activities Please write SE(Code-8)*

10. Academic Record :

Examination Passed	Year of	Class/ Division	% of Marks	Aggregate	Name of Board/Univ.	Subject Offered
<i>High School Leaving Certificate*</i>						
<i>Higher Secondary (10+2)*</i>						
<i>BA/BSc/BCom (Hons/Gen)</i>						
<i>Any other examination(s)</i>						

* Copies of mark-sheets and certificate of the HSLC/Higher Secondary(10+2) and others should be enclosed.

11. **Annual Income of the Parent/Guardian : Rs.....

DECLARATION BY THE APPLICANT

I declare that entries made by me in this form and the documents submitted in support of the information furnished by me in the application form are true in all respects and in case any entry or information or documents are found false, this shall entail automatic cancellation of my admission besides rendering me liable to such an action as the University may deem proper.

I declare that I shall submit myself to the disciplinary jurisdiction of the Vice-Chancellor and other authorities of the University (under Statute 30(7) of the Manipur University Act, 2005)

I further note that my admission to the University and my continuance on its rolls are subject to the provision of the University Statutes, Ordinances and other Rules and Instructions which may be issued from time to time.

I shall abide by the rules of discipline and proper conduct which may be framed in this regard.

Place

Date

Signature of the Applicant

DECLARATION BY THE PARENT/GUARDIAN

I certify that the statements Under items 1,4,& 9 made by my son/daughter/ward and whose photograph appears on this form are correct I shall be responsible for any act committed by my ward against the University Rules.

Place

Date.....

Signature of the Parent/Guardian

Address :

* Please submit alongwith photocopies of supporting documents

FOR OFFICE USE ONLY

Recommended for admission/Not recommended for admission

Date

Head of the Department.....



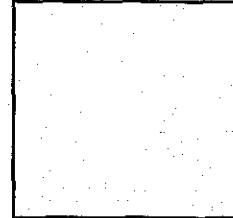
**One Year Certificate Course in Chinese/Germany/
Spanish/French/Japanese Language 2017-18**

MANIPUR UNIVERSITY

CANCHIPUR, IMPHAL - 795003

ADMIT CARD

Admission Test



Name :

Roll No. :(To be filled in by Office)

Signature of Candidate :

Date of Admission Test..... Time

.....
(Signature of HOD with seal)

NOTE

1. *This should be attached with the Application form at the time of submission of form after duly filled in by the candidate.*
2. *Candidates should bring the admit card at the time of test.*