Swami Ramanand Teerth Marathwada University, Nanded



'Dnyanteerth' Vishnupuri, Nanded- 431606 (M.S) (Accredited by NACC with 'A' Grade)



INTERNATIONAL STUDENTS' CENTRE

Cr.	No.:
ы.	110

20 - 20

Admission No.

Note: FOR OFFICE USE ONLY. NOT TO BE FILLED BY THE CANDIDATE

Photo	

COLLEGE/SCHOOL ALLOTTED	FEE DETAILS				
	Receipt No.	DATE	AMOUNT		
COURSE ADMITTED					
Signature of the		Signature of the			
Superitendent/Sr.Clerk/Jr.Clerk		Director/Assist	Director/Assistant Registrar		

TO BE FILLED BY THE CANDIDATE ONLY (Incomplete Applications will not be accepted)

_				I I		1 /	
1.		candidate in full					
	(in capital let						
2.	Father's Nam						
3.	Mother's Na	me					
4.	Nationality						
5.	Country of O	rigin					
6.	Sex (indicate	with ✓ mark)	Male	Female	Female		
7.	Date of Birth	(DD/MM/YYYY)		1		-	
8.	Address for correspondence (Local Address) (in capital letters)						
9.	Permanent Address (Country Address) (in capital letters)						
10	Passport	Old Passport No.		New P	assport No.		
	details	Place of Issue	Place of Issue				
		Date of Issue	Date of Issue				
		Validity date		Validit	y date	1	
11.	Visa	Visa No.				_1	
	Details	Type of Visa (indicate with ✓ mark)	Student Visa		Sub Type		
		Date of Issue					
		Validity Date					
12.	Candidate's	Mobile No.		Alternati	ve Mobile No.		
	details	Email ID		Alternat	ive Email ID		



Swami Ramanand Teerth Marathwada University, Nanded
'Dnyanteerth' Vishnupuri, Nanded- 431606 (M.S)
(Accredited by NACC with 'A' Grade)
INTERNATIONAL STUDENTS' CENTRE

13.	Date of departure f	from the					
	domicile country						
14.							
15.							
16.	Details of the Reside						
	(STAY VISA) (if all						
	RP(STAY VISA)N						
	Date on which RP(STAY VISA)					
	is issued						
1.7	Validity date	(01 :)	1 st Choice				
17.	Colleges of prefere	ence(Choice)					
1.0	Na 641 Carre		3 rd Choice	Ci-1:4:			
18.	Name of the Cours			Specialization	n		
19.	Contact person's	Name					
	details (to be furnished on	Relationship					
	compulsory	Mobile No. Alternative n	abila Na				
	basis)	Email ID	iobile No.				
	oasis)	Alternative E					
		Passport No.					
		other Identity					
		Address	y proor				
		ridaress					
			1				
		DECLAR	ATION ANI) UNDERTAK	KING		
	I the undersioned	d hereby declar	re that the en	tries made hy i	me in	this form and the docum	nents
subn	,	,		•		wledge and belief. I sha	
	* *				•	on furnished by me and	
						he instruction and guide	
						and regulations for eligib	
	pline and proper cor	1 0	-	•			- 5 ,
Lund	lertake to furnish th	e necessary cer	tificates/docu	r Iments in origi	inal ald	ong with a true copy of	each
		•		_		lity and admission shall	
	matically cancelled						
	•		J	1			
Place	e:	Date:		Signature of the	he stud	dent:	
				. 0			
Sign	ature of the Staff of	(ISC)					
(afte	r accepting the form)					
Sign	ature of the Director	of (ISC)					
Sign						l .	
_	n stamp)						