



SHRI VAISHNAV VIDYAPEETH VISHWAVIDYALAYA

Think Excellence. Live Excellence.

APPLICATION FORM FOR ADMISSION

Academic Year:

Form No.*
(For Office Use)

General Instructions:

1. Kindly fill up this form with correct information as an essential and primary step of the admission process. Admission granted on the basis of incorrect information will be ipso facto null and void.
2. Application Form must be filled in blue/black ink and must be complete in all respects. Incomplete forms are liable to be rejected.
3. Candidates seeking admission to any of the programs offered by the University must have appeared in any national/stale-level entrance test. Those who have not appeared in any such test must appear in the entrance test to be conducted by the University in Indore.
4. No copies of any certificates or mark sheets must be attached with this form.
5. In all matters relating to the admission, the decision of the University will be final and binding on the applicants. No correspondence from the applicant with respect to his/her non-selection will be entertained.
6. The admission process at the University shall be subject to the jurisdiction of the courts of Indore.
7. A demand draft for Rs. 1,000/- (Non-Refundable) drawn in favour of Shri Vaishnav Vidyapeeth Vishwavidyalaya payable at Indore OR a photocopy of deposit slip for Rs. 1,000/- (Non-Refundable) in the Account No. 60235029458 of Shri Vaishnav Vidyapeeth Vishwavidyalaya in any branch of Bank of Maharashtra must be attached with this form.

Programme Applied For:

Branch (If applicable):

Demand Draft/Deposit Slip Details:	
DD No.	Bank:
Date:	Amount:

Entrance Test Details:		
Name of the Test	Registration/Roll No.	Score*

* Please attach photocopy of Score card

Candidate's Personal Details

Name (Block Letters) : _____

Address (for Correspondence): _____

_____ Pin : _____

Telephone No. (with STD code): _____ Mobile No.: _____

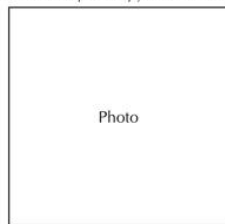
E-mail (Block Letters): _____

Gender: M F Date of Birth: _____ Nationality _____ Category (GEN/SC/ST/OBC): _____

Father's/Guardian's Name: _____

Mobile No. _____ Email (Block Letters): _____

Mother's Name : _____



Educational Background (10 + 2 onwards):

Name of Examination	Year of Passing	Marks Obtained	Max Marks	Aggregate Percentage/ CGPA	Major Subject	University/Board

(Candidates appearing in the final year/semester of the qualifying exam should indicate aggregate percentage obtained in the previous years)

Work Experience (only full-time job after graduation in a professional organisation):

Name of the Organisation	Designation	From (Date)	To (Date)

Are you applying in the category of Foreign Nationals / Persons of Indian Origin (P10) / Non Resident Indians (NRIs) / Children of Indian workers of Gulf Countries? (Yes/No): _____

If yes, please tick in the appropriate box (✓) below and enclose a bank draft for US \$ 50 (or Rs. 2000/-) drawn in favour of Shri Vaishnav Vidyapeeth Vishwavidyalaya payable at Indore. Also, please enclose relevant documents verifying your status.

<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin	<input type="checkbox"/> NRI	<input type="checkbox"/> Gulf Quota
DD No. :		Bank:	
Date:		Amount:	

Declaration:

I have carefully read the instructions and agree to abide by the decision of the University regarding my selection to the programme. I certify that the information furnished in this application form is correct to the best of my knowledge and belief.

Place: _____

Date: _____

Signature of the Applicant

The filled up application form should be submitted on or before the last date to the following:

The Chairman, Admission Division

SHRI VAISHNAV VIDYAPEETH VISHWAVIDYALAYA

Campus: Sanwer Road, Indore-453331 • Ph.: +91-731-2729071-75

Email: admission@svvv.edu.in • website: www.svvv.edu.in

Mailing Address: Shri Vaishnav Vidya Parisar, 177 Jawahar Marg, South Rajmohalla, Indore-452002

Ph.: +91-731-2349111-2 • Fax: 91-731-2349113

Established under Madhya Pradesh Niji Vishwavidyalaya Adhiniyam