



MADURAI KAMARAJ UNIVERSITY
(University with Potential Excellence)
MADURAI 625 021
DIRECTORATE OF DISTANCE EDUCATION



APPLICATION FOR ADMISSION

Course		Course Code		Application No.	
Subject		Medium		Enrolment No.	For office use only

Application Fees & Registration Fees		Address	
D.D. No.			A copy of the photograph in the size of 5 x 7 cm duly signed by the applicant at the top of the photo and attested by a gazette officer at the bottom to be pasted here
Chalan			
Date			
Amount			
Bank Place			

Name (IN BLOCK LETTERS) : English
: Tamil

Date of Birth :
Gender : Male/Female

Seminar Centre :
Mother tongue :
Nationality :
Community : SC/ST/MBC/BC/OC
Physically Challenged : Blind/Deaf/Dumb/Others
Occupation :
Mobile No. :
Email id :
Part I – Language for B.A./B.Sc., :
Elective Subject Area for MBA :

Examination Passed :

Name of the Examination	Subject	Name of the Board/ University	Reg. No.	Month & Year	% of Marks	Class

The following original certificates and Xerox copies are enclosed :

- 1)
- 2)
- 3)
- 4)

I do hereby agree that any dispute arising between this University and myself relating to the sending of the lessons, seminar to be held, the various examinations in various centers to be held, the issuance of pass certificate, course certificate, statement of marks etc. shall be resolved/ decided only by the Court, Forum, Tribunal located within the Territorial jurisdiction where this University is situated and no other Court, Forum, Tribunal will have any jurisdiction to resolve/decide the dispute between the University and myself.

I hereby declare that the particulars given above are correct and that I have fully understood the implications of the above clause and that I will, if admitted, abide by the rules of University.

Date :
Place :

Signature of the Applicant

Academic Centre Office Seal

Signature of the Programme Officer

OFFICE USE ONLY
(FOR Head Quarters, Palkalai Nagar & Madurai City Center)

Assistant

Superintendent/Asst. Registrar

Director