

SRI VENKETESHWARA UNIVERSITY

(A STATE PRIVATE UNIVERSITY ESTABLISHED BY STATE LAGISLATURE OF GOVT OF SIKKIM BY ACT NO 04 OF 2025)

Phone: 881800-1133, 881800-1144 Email: svus.edu@gmail.com

www.svus.edu.in

ADMISSION FORM

(For official use only)								
Regn. No. Date D D M M Y E A R Please Affix Your Recent Passport Size								
INSTRUCTION: Candidate should fill in the form neatly and legibly in English in own hand writing in BLOCK LETTERS using blue/black ball pen only. Photograph								
Course Applied for :								
For the Year 2 0								
PERSONAL INFORMATION								
1. Name								
2. Father's / Guardian's Name								
3. Date of Birth 4. Gender Male Female								
5. Place of Birth a) City								
b) State c) Country								
6. a) Nationality b) Religion								
c) Caste d) Mother Tongue								
e) Category (Attach Certificate) Gen. SC ST OBC Others								
7. Marital Status Single Married Divorced								
8. Present Address								
PIN PIN								
Landline No. Mobile No.								
F-mail Address								

9. Permanent Address																											
] P	PIN						
Landline N	lo.] N	1ob	ile N	No.										
10. Father's / Guardian's Occupation																											
11. ACADEMIC DETAILS																											
Exam Passed						Name of Board or University					Reg. No.			S	Subjects			% with Marks Obtained & total			Year & Month of Passing		Medium of Instruction				
10th Class																											
10+2																											
Degree																											
Post Graduation																											
12. Any working Experience (Attach certificates)																											
13. Hobbies																											

DECLARAT	TION BY THE CANDIDATE & PAR	RENT/GUARDIAN ——————
particulars given are true. I hereby undertake to abide by all the hereafter be introduced for the adm SVUS either inside, outside or anythe management has the full author for any other valid reasons.	ne conditions, rules, regulations in instration of the SVUS . I will do not hing that will interfere with its or rity to expel me for misbehavior, of the fees and other dues to the interfere with its or the interfere with its or the interfere with its or the interfere with any or the SVUS any	rderly working and discipline. I am aware that continuous failures, found guilty of ragging and astitution promptly on demand. I shall pay the ytime after admission and before
Place:		
Date: Signa	ature of the Parent/ Legal Guardia	n Signature of the student
(All the above information will be ke	ept Confidential and strictly for ma	anagement use.)
	TO BE FILLED IN BY THE OFF	FICE ———
The Candidate has been i ADMITTED / REJECTED.	nterviewed in light of her qualifica	ation, aptitude and ability. She is accordingly
Course		
Session	Date:	Admission Cell
	FEE DETAILS	
	FEE RECEIPT DETAILS	
Name of Bank	Rs	
CASH/Check/NEET/UPI/Draft No		Dated
Date:		Signature of Office In charge/Administrator