



**Institute of Management Studies
Devi Ahilya Vishwavidhyalay
SC/ST/OBC Registration Form**

Photograph

Name of the Candidate Mr/Ms: **(Fill in Block Letters)**

Course:..... Date of birth:

Sex:Male/Female:

Category: SC/ST/OBC:

Present Semester: Year: Roll No.....

Information of Last Sem/ Examination.....*ADHAR NUMBER.....

Father's/Husband Name: Mr.....

(Fill in Block Letters)

Mother's Name: Mrs.....

*Parent's Occupation/ Designation:

Place of Work:

Permanent Address:

City: State: Pin code:.....

Phone with Code: Mobile No.:E-mail:

Present/Local Address:

City: State: Pin code:.....

Declaration

I declare that the above statement is true in all respect; I understand that my admission is liable to be cancelled if the above information is found incorrect. I undertake to abide by the rules and regulations of the Institute and University. In the case of in-disciplinary act or violation of rules and regulations, decision of University authorities shall be final and binding.

Signature of Father / Guardian:

Signature of candidate:

Date:.....

Director