All India Council for Vocational and Paramedical Science

(An Autonomous Institution Registered Under the Trust Act of 1882) (Run by All India Council for Vocational & Paramedical Science)

| APPLICATION FORM | | | | | | |
|---|---|--|--|--|--|--|
| Session 20 20 | Date of Apply | | | | | |
| Centre Code | | | | | | |
| 1. Name of the Applicant (Mr./Ms.) (Write your full name as mentioned in your Secondary certificate) | Photograph of Applicant Paste your recent passport size color photograph | | | | | |
| 2. Father's Name | Do not pin or staple | | | | | |
| 3. Mother's Name | | | | | | |
| 4. Date of Birth DDMMYYYYY 5. Sex() MFT 6. Nationality | | | | | | |
| 7. Father's Occupation | | | | | | |
| 8. Address for Correspondence | | | | | | |
| | | | | | | |
| Pin Code | | | | | | |
| City State | | | | | | |
| 9. Permanent Address | | | | | | |
| | | | | | | |
| Pin Code | | | | | | |
| City State | | | | | | |
| Tick right (✔) If your permanent address is same as correspondence address. | | | | | | |
| 10. Contact No. (Applicant) 11. Contact No. (Parent/Guardian) | 17. Category(✔) | | | | | |
| +91 +91 | General | | | | | |
| 12. Email Address | ☐ ☐ OBC ☐ SC | | | | | |
| 13. Centre Name | | | | | | |
| 14. Course Name | | | | | | |
| 15. Course Code | | | | | | |
| 16. Father's Annual Income (in Rs.) | Signature of Applicant | | | | | |

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|----|------------|-------|-------|-----|-----|-------|----------|
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Place

| Name of Examination | Board | Subject | Year of Passing | Percentage |
|---------------------|-------|---------|-----------------|------------|
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| | | | Declarat | <u>ion</u> | | | |
| 7 | Ve | | (Candidate) | | (| (Parent/Guardian) |) |
| | | | in this form are true and corre | | | | |
| | | | prospectus and shall abide by the fore the completion of the compl | | | | |
| | | | be liable to pay the fees of f | | | | |
| | ertake not to claim eeding. | any refunds | of tuition fee or any other fur | ids deposits. We under | rtake not to indul | ge into any legal | L |
| | - | | | | | | |
| Plac | e | | Signature of Applicant | Signatu | re of Parent / C | Guardian | ٦ |
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| Dat | · A | | | | | | |
| Dat | | | | | | | |
| | | | | | | | |
| | | | Sign within the | box without touching the | e edges | | |
| | | | | | | | |
| | | | Father/Mother/Guardia | n's Undertaking | | | |
| | 1 My Son/Days | -htom/woud | | (Student | Noma) is saalsina | admission | |
| | | - | event of his/her being admitted | · | | | |
| | • | | rior during the education at the | | 1 3 1 | | |
| | | | m/her by the Institute. | | | | |
| | 3. Any other liab | oility related to | his/her education at the Institu | ition. | | | |
| | Further, I also ag | ree that he/she | shall abide by the rules of disc | eipline of his/her centre | as administered b | by the | |
| | | Institute. Not | e: Admission is purely on ter | nporary basis, subject | to confirmation b | y the | |
| | AICVPS. | | | | | | |
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All pages & Documents are necessary to be signed by the student.

Date

Signature of the Guardian

Ragging is Strictly prohibited inside & outside the campus. If any student - Found indulge in such activity will be highly punished.

Undertaking by The Applicant

- 1. I declare that I have not been debarred from joining any educational institution or rusticated from the Institution / Board last attended.
- 2. I declare that all the statements made in the application by me are true to the best of my knowledge and belief. I clearly understand that if any of the statements subsequently found untrue, my admission to the Institution would stand automatically cancelled, without any claim for refund.
- 3. I have read the rules & regulations regarding admission criteria made by the Institution and instructions incorporated there in carefully. I have read and understood the conditions of eligibility for the programme to which I seek admission. I fulfill the minimum eligibility criteria and I have been provided with necessary information in this regard. In the event of any information being incorrect or misleading my candidature shall be liable to cancellation by the AICVPS at any time and I shall not be entitled to refund of any fee paid by me to the Institute.
- 4. I have satisfied my self that I fulfill the minimum educational, physical and medical standards and that I agree to be removed from the institution if found deficient in these standards during the course of my stay at the Institute.
- 5. I agree that admission may be granted to me on the conditions stated in the latest edition of the prospectus / Syllabus prescribed by the AICVPS or such modification thereof as may be made by the authorities.
- 6. I have read the rules, regulations and code of conduct as prescribed by The AICVPS and promise to abide by them and those that may be made in future for the admission to the Institute. I also undertake that I shall do noth-ing inside Instution Campus that will interfere with its discipline.
- 7. I undertake to pay the due of Institute and other dues regularly if admitted.
- 8. I also declare that:
 - A. I have never been convicted of any criminal offence, nor have I ever been released on bail in connection with a criminal case.
 - B. No case of criminal offence or moral turpitude is pending against me in any Court of law.
 - C. No complaint of F.I.R. has ever been lodged against me by the School / College.
 - D. I have not been debarred from appearing in by Coordination Committee.
 - E. Admission is purely on temporary basis subject to confirmation by the concerned authorities.
- 9. In case it is found at any stage by the authority that I am not eligible for admission/course, I shall have no Claim for the refund of fees and will not make any legal dispute.
- 10. I accept that if any above undertaking is missing I agree to be prosecuted by the court of law for providing take acceptance take statement / declaration.

| | Place | | Date | Signature of the Applicant | | |
|----|--|-----------------|---------|----------------------------|--|--|
| | | | | | | |
| Pl | Please Mention the source of information from where you got to know about the AICVPS | | | | | |
| | Newspaper | Magazine | Website | Social Site | | |
| | Friend | Other (Mention) | | | | |

For Office Use Only

| Admission granted for the | | | | | | |
|----------------------------------|--|--|--|--|--|--|
| Amount Received | Amount Received Amount in Words | | | | | |
| Detail of Demand Draft or Cheque | Bank Name with Branch Address | | | | | |
| D D M M Y Y Y Y Amount | n Figure | | | | | |
| Amount i | n Words | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Admission Coordinator Principal with Seal | | | | | |
| Enclosures (Photocopy) () | | | | | | |
| Certificate of 10th Class | | | | | | |
| Mark sheet of 12th Class | | | | | | |
| Mark sheet of UG | | | | | | |
| Residence Proof | | | | | | |
| Certificate of Bonafide | | | | | | |
| Medical Certificate | | | | | | |
| Certificate of Handicapped | | | | | | |
| Income Certificate Identity | | | | | | |
| Proof | | | | | | |
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The application filled in by the student, along with requisite fee & copies of certificate must be submitted to respective Institution

Signature of the Applicant