



Form No.

DR. C.V. RAMAN UNIVERSITY
Kargi Road, Kota, Bilaspur, C.G.

APPLICATION FORM

Name : Mr./Ms.
Date of Birth :
Course (if any optional group) :
Father's/Guardian's Name :
Father's Occupation :
Contact Address :
Phone / Mobile :
E-mail :

Academic Qualifications

Exam	Board/University	Year of Passing	Subject	%Marks
10 TH				
12 TH				
GRADUATION				
POST GRADUATION				
PET/AIEEEE/CAT/MAT/PRE.B.Ed.				

Declaration

I hereby declare that the information submitted is complete and correct to the best of my knowledge. I fully agree to abide by the rules and regulations of the University as they are now and may be in the future constituted, and I will not claim for any refund of fees.

Signature of Father/Guardian

Signature of Applicant

Date:

Note: Enclose attested Mark Sheets.

Please fill in the application form and attach of DD of Rs.1200 and send it to CVRU to get your application processed and to receive the hard copy of the Prospectus.