

MAHARSHI DAYANAND UNIVERSITY, ROHTAK

DIRECTORATE OF DISTANCE EDUCATION

(For Re-Registration Students Only)

ADMISSION-CUM-EXAMINATION FORM Session: January/July _____

NO COLUMNS SHOULD BE LEFT BLANK

Enrollment No. _____ Roll No. _____ (To be filled by the candidate)

Name of Programmed _____ Semester _____

Name of the Study Centre (SC) : _____ SC Code : _____

1. Name of the candidate

(In Block Letter) _____

2. Father's Name

(In Block Letter) _____

3. Mother's Name

(In Block Letter) _____

4. SC/ST/BC/Physically Handicapped _____

5. Self/Ward/Spouse of MDU Employee Yes/No (Attached Certificate)

6. Papers in which appearing

Course Name	Papers	

7. Details of Semester Examination in which appeared from MDU

Semester	Roll No.	Month/Year	Result	Marks Obtains
I Semester				
II Semester				
III Semester				
IV Semester				
V Semester				

8. Whether disqualified from any exam or any unfair means case is pending _____

9. Bank Draft No. _____ Date _____ Amount Rs. _____

Favour of finance officer MD University Rohtak payable at Branch MDUniversity Rohtak
Code No. 4734. Please write Name & Address and programme applied for on the back
of the bank draft.

10. List of documents attached

1. Attach two Extra passport size photograph duly attested

2. _____ 3. _____

11. Correspondence Address _____

_____ Ph. No. _____

Signature of the Incharge Study Centre

(with seal)

Date : _____

(Signature of the applicant)

(FOR OFFICE USE ONLY)

Whether/ Not Eligible _____

Checked by

(Clerk)

(Assistant)

(Supdt.)