



RANCHI UNIVERSITY, RANCHI REGISTRATION FORM

Reg. Fee Rs.....

Receipt No.....

Date.....

1 NAME (IN BLOCK LETTERS)

2 FATHER'S NAME

3 MOTHER'S NAME

4 DATE OF BIRTH
Date Month Year

5 COLLEGE / DEPTT

6 SEX ('M' OR 'F')

7 CATEGORY (ST/SC/BC-1/OBC/GEN)

8 PRESENT ADDRESS

9 PERMANENT ADDRESS

10 NAME IN HINDI

11 LAST EXAM PASSED
Board / University

12 PREVIOUS REG NO.
Attach Original Migration

13 MOBILE NO

14 E-MAIL

15 BLOOD GROUP

16 MARK OF IDENTIFICATION

17 OLD REGISTRATION NO. RU (If any):

18 SUBJECT FOR B.A./B.Sc./B.Com.

FOR P.G. & OTHERS

MJ-1	
AEC-1	VAC-1
MN-1A	
SEC-1	
MDC-1	

Please attach the original copy of the migration certificate and photocopy of the relevant documents.

DECLARATION

The above information's are correct to the best of my knowledge. In case of any wrong information. I shall be held responsible and university may take appropriate action.

Date.....

Place.....

Signature of the Candidate

CERTIFICATE BY THE PRINCIPAL/HOD

This is to certify that the information submitted above are according to the records of this office. His/her, application may be considered for registration in the university.

Signature of the Principal/HOD with Seal

Encl.

1.

2.

3.

FOR OFFICE USE ONLY

The application has been scrutinized and registration may be made

Assistant

S.O.

Asst. Registrar

Alloted Registration No.