	Space for photograph (Passport Size) Attested by UNIT			
STUDE				
	Academic Session			
		tance Learning		Correspondence Programme
Books Required Yes	No			
Application Status	Programme Enrolled Course Code	: : :		
Full Name of Student (In Block letters)	Last Nar Mr Ms Last Name	ne N Middle N		First Name
Father's Name				
Nationality		State of Don	nicile	
Date of birth	Date	Month		Year
Sex				
E-Mail Address				
Correspondence Address			 Telephone(in Home Other Mob 	
Employment History (For Last 5 years, if applicable)	Name & Address of Organization	Designation	From	To

Educational Qualifications :

	Name of School/ University	Year of passing	Board/College/ University	Main Subject	Aggregate % of Marks
Class 10					
10 + 2					
Graduation					
Post Graduation					
Others					

Undertaking :

I solemnly affirm that the above information made and furnished by me is true and correct. Further, I am being admitted to the above stated programmes entirely on my request and I agree to abide by all the rules and regulations of Amity University. In the event of suppression or distortion of any fact like educational qualifications, nationality, etc..., made in the Enrollment Form, I understood that my admission is liable to be cancelled.

Date :			
Place :			(Signature of Student)
		(FOR OFFICE USE)	
		Particulars Verified	
Office Seal			Signature : Head of the Study Centres/Unit Name/Designation
		For Use By Office	
Admission F	ee (Rs/- Paid	Vide Cash/DD/Chq N	IoDated
of	Bank) payable at Del	lhi/Noida.	
Date :			Signature
Place :			
Student Enro	llment/Not Enrolled		
(1)	Enrollment No. Allotted		