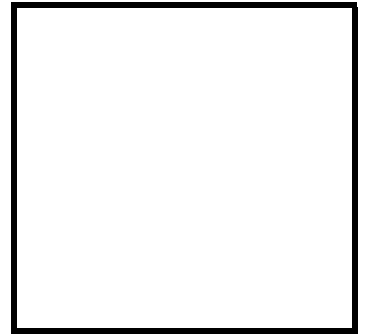


AMITY LAW SCHOOL, DELHI
REGISTRATION - CUM - ENROLMENT FORM
(FOR FRESH STUDENTS - 2011 Batch)

PERSONAL PARTICULARS

Programme Enrolled For _____
Academic Session _____
Full Name of the Student _____
Nationality _____
Date of Birth _____
Sex _____
Category (SC / ST / OBC) _____
Emergency Contact No. _____



CORRESPONDENCE ADDRESS

Address _____
City _____
State _____
Pin _____
Tel _____
Fax _____
Mobile _____
Email _____

PERMANENT ADDRESS

Address _____
City _____
State _____
Pin _____
Tel _____
Fax _____
Mobile _____
Email _____

Place of Stay during this semester (Non - Hostellers)

With Parent / Guardian

Own Arrangement

Address: _____
City: _____ Pin: _____
Phone: _____ Mobile: _____
E-mail: _____

Details of Educational Qualifications (from High School onwards)

Name of Qualifying Exam	Year of Passing	School / College	Board / University	Percentage of Marks (Best of Four)

Any type of Sickness that you are prone to and the line of treatment

Any particular Doctor to be contacted in case of your sickness

Dr's Name _____

Address _____

City _____

Pin _____

Tel. _____

Fax _____

Email _____

Your Blood Group _____

FAMILY PARTICULARS

FATHER

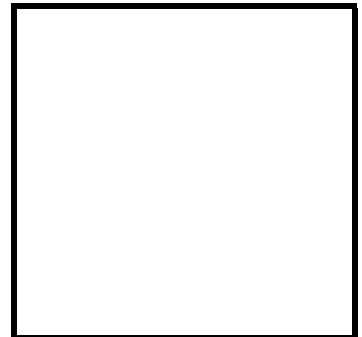
Name _____

Occupation _____

Address _____

Mobile No. _____ Tel. No. _____

E-mail ID _____



MOTHER

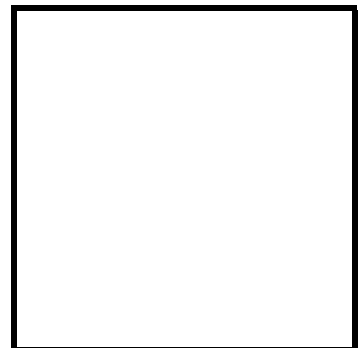
Name _____

Occupation _____

Address _____

Mobile No. _____ Tel. No. _____

E-mail ID _____



(Signature of the Student)

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 Programme entirely on my request and I agree to abide by all the rules and regulations of the Institution / University which I have read and understood. In the event of suppression or distortion of any fact like educational qualification, nationality, etc. made in the Registration - cum - Enrolment Form, I understand that my admission is liable for cancellation.

I affirm that I will not involve myself in any case of indiscipline during the period of my study in the Law School.

I have full knowledge of the fact that in case my attendance in any subject falls below 75%, I shall not be allowed to appear in the end term examination.

I will inform the college administration promptly if there is any change in the status of the above information.

Date _____

Place _____

(Signature of Student)

(Name & Signature of the Verifying Faculty of the respective Batch)

For Official Use

Enrollment No. allotted

Date _____

Place _____

Office Seal

(Signature of Authorised Officer)

Date _____