



# KUVEMPU UNIVERSITY

JNANA SAHYADRI, SHANKARAGHATTA, SHIVMOGGA DISTRICT-577451

## APPLICATION FOR ADMISSION TO POST-GRADUATE/P.G.DIPLOMA/CERTIFICATE COURSES FOR THE ACADEMIC YEAR-2024-25

Application Fee: **Rs.350-00**::For SC/ST/Cat-1: **Rs.175-00**

### PERSONAL DETAILS

Program Level	PG:	PG Diploma:	Certificate:
Candidate Name (Same as in Aadhar)	<i>Affix recent passport sized photo here.</i>		
Provide Mobile Number Linked with Aadhar			
Gender			
Father Name			
Mother Name			
Guardian's Name			
Father/Mother/Guardian's Mobile Number			
Email Address			
Alternate Email Address			
Date of Birth	Day:	Month:	Year:
Alternate Mobile Number			
Residential Status	Non-Indian:	NRI:	
<b>Permanent Address</b>			
		Pin Code	
Taluk:	District:		
Area (Tick appropriate box)	Rural Area:	Urban Area:	
State			
<b>Current Address</b> If same as above, Don't Fill			
		Pin Code	
Taluk:	District:		
Area (Tick appropriate box)	Rural Area:	Urban Area:	
State			

### CATEGORY Under which seat is sought (Put ✓ mark in appropriate box in Category Field)

Religion:							Caste:						
Category	C-1	IIA	IIB	IIIA	IIIB	SC	ST	GM	Sports				
	PWD	CDP	NSS	NCC	OU	KM	HyK	GD M	Co F				

Family Income per Annum	Rs.		
R.D Number	<b>Caste Certificate</b>		<b>Income Certificate</b>
	Example: "RDXXXXXXXXX321"		Example: "RDXXXXXXXXX321"
<b>Attach attested copies of the documents with this application Form</b>			
Do you belongs to Kalyana Karnataka	Yes:	No:	

**SPECIAL CATEGORY (Put ✓ mark in appropriate box)**

Are you a Rural Candidate?	Yes	No	Are you claiming under political Sufferer Quota?	Yes	No
Kannada Medium:	Yes	No	Children of Sexually Exploited/HIV Infected/Devadasi:	Yes	No
Are you a Kashmiri Migrant?	Yes	No	Are you Child of Freedom Fighter?	Yes	No
Are you claiming under Defence Personnel Quota:	Yes	No	Are you a Person with Disability?	Yes	No
			Are you a Gadinadu/Horanadu Kannadiga?	Yes	No

**Are you claiming Seat Under any of the Below Listed Quota? (Put ✓ mark in appropriate box)**

Sportsperson/Athlete at the University/State/National Level?	Yes	No	Destitute Women:	Yes	No
NCC (Please Provide B/C and any other Certificate):	Yes	No	Displaced Citizen (Nirashritharu):	Yes	No
NSS:	Yes	No	Scouts and Guides:	Yes	No
LCA (Literary & Cultural Activities):	Yes	No	University Teaching Employee:	Yes	No
Child of Farmers who committed suicide:	Yes	No	University Non-Teaching Employee:	Yes	No

**PREVIOUS EDUCATION DETAILS (Please submit attested copies of below documents with this form)**

10 <sup>th</sup> Standard Education Details	Board Name			
	Registration Number			

12 <sup>th</sup> Standard or Equivalent Education Details	Pre-University			
	Registration Number:		Year of Completion:	
	Institution Name:		College Code:	

Under Graduation	University Name:			
	Course Studies (Example B.A., B.Com.,)			
	Registration Number:		Month & Year of Completion:	
	Optional Subjects			
	College Name:		College Code:	
Total % or CGPA Obtained				

Marks obtained in the Subject for which P. G. admission is sought (enclose copies of marks cards of all subjects)	Subject:					
	Year	Semester	Marks Obtained	Maximum Marks	Percentage	
	I	1 <sup>st</sup>				
		2 <sup>nd</sup>				
	II	3 <sup>rd</sup>				
		4 <sup>th</sup>				
	III	5 <sup>th</sup>				
6 <sup>th</sup>						

**:: APPLYING FOR ::**

Program Name (Example M.A., M.Sc., etc.,)	
Discipline (Economics, Physics, etc.,)	

Priority Selection (Write your priority, for example University Main Campus/PG Centre Name/College Name)	1	
	2	
	3	
	4	
	5	

Please refer e-prospectus at [www.kuvempu.ac.in](http://www.kuvempu.ac.in) website for more information regarding Programmes, Disciplines, P.G. Centres, Colleges and others details.

**Important Note:**

- Fill separate APPLICATION FORM for different Programmes/Disciplines.
- Submit duly filled application form at concerned P.G. Departments/P.G. Centres of Kuvempu University with necessary documents (SSLC Marks Card, PUC/Equivalent Marks Card/Degree Marks Cards/Degree Certificate/Caste/Income Certificates etc.,
- Candidates should fill the same application through online at UUCMS portal with necessary documents, once the portal is enabled for registration.
- The Application fee should be paid through Bank Challan Attached with this Application Form (A/c No.54023036291, State Bank of India, Jnanasahyadri Branch, Shankaraghatta, IFSC Code: SBIN0040759)

Date:  
Place:

Signature of the Candidate

BANK COPY

BANK : STATE BANK OF INDIA  
JNANASAHYADRI BRANCH, SHANKARAGHATTA  
BRANCH CODE : 40759, IFSC CODE :SBIN0040759

Student Name : .....  
Mobile No. ....  
Subject : ..... Admn. No.....  
Date : ..... Place : .....

S.No.	Account Head	Amount
I.	<b>Administrative Fee</b>	
01	Admission Fee (University)	
02	Registration	
03	University Development Fund	
04	Sports	
05	Sport Development Fund	
06	Library / Reading Room	
07	ECA / SWF / TWF	
08	Medical Examination	
09	Insurance Premium	
10	Identity Card	
11	Carrier Guidance Fund	
12	Art of living	
13	NSS	
14	Skill Development	
15	Computer / Internet	
16	Tuition Fee / Lab. Fee	
17	Study Tour	
18	Flag / Poor Student Fund Fee	
II	<b>Other Fees - UG/PG</b>	
01	Re-admission Fee	
02	Change of College	
03	Change of Course	
04	Change of Language/Optional	
05	Transfer Certificate	
06	Migration Certificate	
07	Eligibility Certificate	
08	Medium of Instruction	
III	<b>Ph.D./M.Phil. Fee</b>	
01	Ph.D./M.Phil. Application	
02	Pre-Ph.D./Entrance Examination	
03	Ph.D./M.Phil. Registration	
04	Ph.D./M.Phil. Tuition	
05	Ph.D./M.Phil. Lab	
06	Change of Title	
07	Change of Guide	
08	Extension of Time	
09	Special Fee	
<b>TOTAL Rs.</b>		

..... Rupees only.  
Cash / DD No..... Drawn on .....  
..... (Name of Bank & Branch)

Signature of the Remitter

For the Use of the Bank

Receipt No.....

Date & Seal Signature of the Receiving Authority

FINANCE SECTION COPY

BANK : STATE BANK OF INDIA  
JNANASAHYADRI BRANCH, SHANKARAGHATTA  
BRANCH CODE : 40759, IFSC CODE :SBIN0040759

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Date & Seal Signature of the Receiving Authority

ACADEMIC SECTION COPY

BANK : STATE BANK OF INDIA  
JNANASAHYADRI BRANCH, SHANKARAGHATTA  
BRANCH CODE : 40759, IFSC CODE :SBIN0040759

Student Name : .....  
Mobile No. ....  
Subject : ..... Admn. No.....  
Date : ..... Place : .....

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<b>TOTAL Rs.</b>		

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Cash / DD No..... Drawn on .....  
..... (Name of Bank & Branch)

Signature of the Remitter

For the Use of the Bank

Receipt No.....

Date & Seal Signature of the Receiving Authority

STUDENT COPY

BANK : STATE BANK OF INDIA  
JNANASAHYADRI BRANCH, SHANKARAGHATTA  
BRANCH CODE : 40759, IFSC CODE :SBIN0040759

Student Name : .....  
Mobile No. ....  
Subject : ..... Admn. No.....  
Date : ..... Place : .....

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