

Date of Admission



University of Kalyani
DIRECTORATE OF OPEN & DISTANCE LEARNING
Kalyani, Nadia: 741235, W.B

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size color
Photograph
signed by the
Candidate

APPLICATION FORM FOR READMISSION INTO M.A. PART-I

Name of the Study Centre:

Centre Code No.:

M.A. Part-I (Mention the Name of the subject):

1. Name of the Applicant (in capital letters):

2. Son/Daughter/wife of:

3. Enrolment No. :

4. Address for Communication:

5. Mobile No:

6. Sex: (Male/Female/Transgender) 7. Rural/Urban:

8. Whether Belongs to Minority Community: (Yes/No)

9. BPL Category: (Yes/No) 10. Caste: (GENERAL/SC/ST/OBC-A/OBC-B)

11. Payment Details: (Through State Bank of India)

a) A/c Name- DODL, University of Kalyani b) Amount (In Rs.):

c) Journal No. d) Date of Payment

I shall abide by the rules, regulations and directives from the office of the DODL, failing which the DODL may forfeit my studentship.

Date:

Full Signature of the Applicant

Documents to be enclosed:

- (I) Fee Payment Receipt of SBI.
- (II) Self Attested Photocopy of the Enrolment Certificate.
- (III) Original Identity Card (to be shown)

FOR OFFICE USE

Admit

Checked by.....

(Signature of the Head of the Study Centre / Head Quarter)