



# केशव महाविद्यालय KESHAV MAHAVIDYALAYA

(UNIVERSITY OF DELHI)

H-4-5 Zone, Pitampura, Delhi-110034

APPLICATION FORM FOR ADMISSION

Gender : Male/Female/Other.....

College Roll No. ....

Fee Receipt No. ....

Date .....

Cashier .....

CATEGORY &  
CASTE

SC/ST/OBC/  
PwD/CW/KM

Self attested Photograph  
To be pasted

COURSE TO WHICH ADMISSION IS SOUGHT..... Class - Ist / IInd / IIIrd Year

University Registration No. / OMR No. ....

Name (In Block Letters) ..... Nationality : .....

Date of Birth (In figures) ..... (in words) .....

Age as on 1st October 20 ..... Years ..... Month ..... Days

Father's Name ..... Occupation .....

Office Address .....

Tel./Mobile No. .... E-mail .....

Mother's Name ..... Occupation .....

Office Address .....

Tel./Mobile No. .... E-mail .....

Annual Income : i) Father ..... ii) Mother .....

Address for Correspondence .....

Guardian's Name & Address if any .....

Province / State to which you belong ..... City /Town .....

Permanent Address .....

Telephone No. Residence..... Mobile .....

School/College Last Attended ..... Year of Leaving .....

Rank (if any) .....

Examination Passed	University or Board	Year	Roll No.	Subject	Max. Marks	Marks Obtained	Percentage
				1			
				2			
				3			
				4			
				5			
				Percentage in PCM / MCs .....			
				Percentage in Language & three academic subjects / Best of four.....			

Hindi studied upto Class .....in year.....

Mention the mode of conveyance you would like to use to come to the College .....

Distinction in Sports / Games / Extra-curricular activities

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I declare that the information given above is correct. I further declare that I shall submit myself to the disciplinary jurisdiction of the Principal, and the other authorities of the University, who may be vested with power to exercise discipline under the act, statutes and ordinances of the University.

I am seeking admission with the consent to my Parent / Guardian.

\_\_\_\_\_  
Signature of Parent / Guardian

\_\_\_\_\_  
Signature of Applicant

**ADMISSION ORDER**

Admit provisionally ..... son / daughter of .....  
to ..... Class on payment of prescribed fees and subject  
to the approval of the university.

\_\_\_\_\_  
Department-in-Charge  
(Admission)

**PRINCIPAL**

\_\_\_\_\_  
Convenor  
(Admission)

**FOR OFFICE USE ONLY**

Univ. Roll No.	Examination	Year	Marks Obtained	% of Marks	Passed / Failed

(i) UNIVERSITY ENROLMENT NO. ....

(ii) Delay condoned vide Vice Chancellor's Letter No. .... Dated .....