



Arunodaya University

(Established Under Section 2(f) of UGC Act, 1956)

www.arunodayauniversity.ac.in

To,

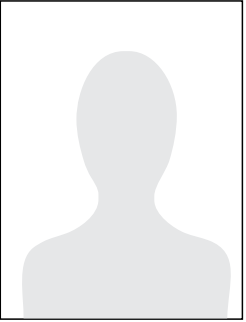
The Controller Of Examination, Arunodaya University, Itanagar, (Arunachal Pradesh).

APPLICATION FOR CERTIFICATE

- Migration Certificate* Provisional Certificate Diploma/Degree Certificate
 Bonafide Certificate Consolidated Marksheet Transfer Certificate

(* Pervious Qualification Original Migration/L.C./T.C.-Mandatory)

• Applicants Address

Registration No :	<input type="text"/>		
Student Name :	<input type="text"/>		
Father Name :	<input type="text"/>		
Mother Name :	<input type="text"/>		
Address :	<input type="text"/>		
	Pin No. : <input type="text"/>		
Mobile No. :	<input type="text"/>	E-mail : <input type="text"/>	
Name of Examination :	<input type="text"/>	Stream : <input type="text"/>	Year of Passing : <input type="text"/>

• Academic Details (Enclose Xerox and attested copies of the Marks card of all semester)

Course	Stream	Semester / Year	Month & Year Of Passing	Total Marks

• Details of fess paid:

DD/Challan No.	DD Date	DD Amount(Rs.)	Bank Name (DD should be payable at Itanagr)

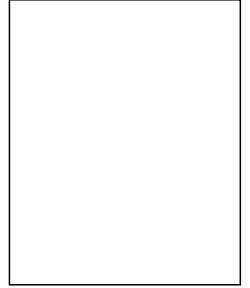
• Declaration By the Applicant :

- I Certify that I have read and understood all the provisions indicated in the prospectus and the circulars published in the website www.arunodayauniversity.ac.in from time to time
- I certify that after being fully satisfied with this course I had decided to get enroled out of my own free will and desire.
- I further certify that same had been without any inducement and misrepresentation either from*the said University or any other person concerned.
- I shall abide by this undertaking and shall not hold anybody responsible for the same in any manner after the completion of the course.
- I hereby deftly that all the particulars stated in this application are true to the best of my Knowledge & belief. In the event of suppression or distortion of any fact made in my application only I will be held responsible.
- I understand that FEES once paid will NOT be refunded.

UNDERTAKING FORM (BY THE STUDENT)

To,

The Controller of Examinations,
Arunodaya University
Itanagar, Arunachal Pradesh



Sir/Madam,

This is to declare that, I _____ Son/ Daughter of _____ have taken admission in _____ Course in Arunodaya University, Itanagar (Arunachal Pradesh). And I assure that all the documents enclosed related to my qualification regarding the admission are genuine and authentic.

In the event of suppression or distortion of any fact like educational qualification, documents related to nationality acid study period etc. made in my application form, I understand that my admission is liable to be cancelled.

I am eligible for the examination as per the rules and regulations of the university. I shall be responsible for the consequences if the information filled by me is found incorrect If I am found ineligible for admission to a class, at any stage my application will be rejected even if my result has been finally declared and consequently such result also, would be void.

I have gone through the rules, regulations and Educational programmes offered by Arunodaya University and on being fully satisfied, I have applied for admission on my own. Hence I am aware that the programmes offered by the said university are approved by the UGC. However if I am unable to get advantage out of said programmes after its completion, in securing job, job promotion and/ or for further advance studies on any account and for any other reason, the said University will not be held responsible in any manner and I also undertake not to claim any damages for the same.

Place :

Signature of The Candidate

Date :

Enrollment No.