



**10. DECLARATION BY THE CANDIDATE:**

I .....hereby declare that the information furnished in this form is true to the best of my knowledge and belief. I understand that my candidature is liable to be cancelled by the University if any information given above by me is found incorrect or misleading.

Date:

Place:

Signature of the Candidate

**11. Declaration by the Parent/Guardian**

I undertake the responsibility of paying all dues of my son / daughter regularly and I bind myself for his/her dues compliance with all rules and regulations that are in force from time to time in the University.

Place:

Date:

Signature of the Parent / Guardian

**Verification Detail**

I have verified the original documents. The candidate fulfills the eligibility criteria as per the prescribed norms of the University.

Date:

Place:

Verified by  
(Centre Director with Seal)

Permanent Registration No. _____
Enrollment No: _____

Assigned by  
(Centre Director)

**Fee Payment Schedule**

Date	Total Fee	Fee Paid	Balance Due