KARNATAKA STATE OPEN UNIVE	•
NEW ADMISSION FC	
YEAR: 201st / 2nd	
Please read carefully IMPORTANT INSTRUCTIONS TO (No column should be left blank) (WRITH	
Name of the Program	
Sem/Year	
Study Center Code A P 7 9 6 Serial No.	
Study Center Name VAS TECHNOLOGI	ES.
1) Name of the Candidate	ATTACH HERE PASSPORT SIZE
	PASSPORT SIZE PHOTOGRAPH
2) Father's Name	
3) Guardian's Name	
(If Applicable) Relationship	
4) Date of Birth (dd/mm/yyyy)	e/Female 🗌 M for Male, F for Female
6) General(GEN) /SC/ST/OBC/Physically Handicapped (PH)	
7) Age in Years (as on 01/07/10) 8) Regulation RI RII	[For BA/B.Com.]
9) Mention if Self or Guardian is an employee of KSOU/VET Y for	or Yes, N for No
10) Languages Opted (BA ONLY) Lang-1 English	Lang-2 Hindi
11) Subjects Opted (BA ONLY) Opt-1	Opt-2
Opt-3	I.C.H.R & E.S
12) Permanent Address	
13) CorrespondenceAddress	
City	
14) Communication Numbers (withSTDCode) (0)	
	1)
15) E-mail Address	
16) Academic Qualification	
Exam. Passed University/Board/Institute	Year Class(%)
• Study Center Code available on VET website http://www.vet.pctiltd.com. • (Attack	h certified / attested photocopies of all qualifying

13)	Demand	Drafts	(DD)	Details	:
±J)	Demana	Dianco	(00)	Detunis	•

a)	In favour of Finance Officer, KSOU payable at Delhi/New Delhi				
	Crossed Bank Draft No				
	Bank Name				
b)	In favour of Virtual Education Trust payable at Delhi / New Delhi				
	Crossed Bank Draft No				
	Bank Name				
	(in case of late fee, please add the late fees amount to Virtual Education Trust Demand Draft)				
	Candidates are advised to write their Name, Application No, Study Center Code & Study Center Name and Programme applied for ,without fail, at the back of the Bank Drafts.				
14)	List of documents attached (Please fill without fail)				
	1				
	3 4				
15)	Lateral entry to which programme (if applicable) Semester C				
16)	Elective Stream opted				
	(For M.Sc.(IT) 3 <sup>rd</sup> Semester and MCA 5 <sup>th</sup> Semester lateral entry candidates only. Please note that Elective stream once chosen cannot be changed)				
	<b>Declaration by the Candidate :</b> I acknowledge to have fully read the prospectus and certify that I have understood all the provisions indicated therein. I certify that I am qualified for the program as indicated in the prospectus. I hereby certify that all particulars stated by me in application are true to the best of my knowledge and belief. I understand that my admission is liable to be cancelled if I suppress or distort any information furnished in my application. I understand that University reserves the right to modify/ delete the syllabi, program structure, rules and regulations, as and when required. I understand fees once paid will not be refunded. I understand that the University reserves the right to cancel the admission without assigning any reason.				
	Place:				
	Date:     Signature of the Candidate				
STU	<b>DY CENTRE</b> I certify that I have personally verified the original certificates and the attached documents including DD's. I certify that the candidate fulfill the eligibility criteria as per Admission Qualification norms prescribed in the prospectus. I shall be held responsible for any kind of litigation with regards to services.				
	Date:     Study Centre Seal     Signature of Co-ordinator				
VET	(FOR OFFICE USE ONLY)				
Proar	ram eligibility (Program / Semester)				
-	ked byVerified By				
KSO	U				
Progr	ram eligibility (Program / Semester)				
	ked byVerified By				
	<ul> <li>a) Attested photocopies of the Certificates/Detailed Marks Cards of the qualifying exams.</li> <li>b) Crossed DDs (2nos).</li> <li>c) Identity Card (Duly filled &amp; photograph pasted by the candidate) and attested by study center co-ordinator</li> </ul>				

d) Candidates are advised to collect the candidate Copy of the Receipt for Admission from the Study Centers.





## KARNATAKA STATE OPEN UNIVERSITY, MYSORE **RECEIPT FOR ADMISSION FORM**

Study Center Name	Date	
Received Admission Form SI. No	ProgramSemester	
Name & Address of the Candidate		
Phone No Em	nail	
along with crossed Bank DD No	DatedAmount	
Name of the Bank	.in favour of Finance Officer payable at Delhi	/
New Delhi and second crossed Bank DD. No	DatedAmount	
Name of the Bank	in favour of Virtual Education Trus	t,
payable at Delhi/ New Delhi.		
Enclosures : 1. Certificates (Nos.)	2. DDs (2 Nos.) 3. Identity Card	t

Signature of the candidate (To be filled by candidate) Authorized Signatory



## **STUDY CENTER COPY**

(To be retained by the Study center)

## KARNATAKA STATE OPEN UNIVERSITY, MYSORE **RECEIPT FOR ADMISSION FORM**

Study Center Name	Date
Received Admission Form SI. No	Program
Name & Address of the Candidate	
Phone No	Email
along with crossed Bank DD No	DatedAmount
Name of the Bank	in favour of Finance Officer payable at Delhi/
New Delhi and second crossed Bank DD. No	AmountDatedAmount
Name of the Bank	in favour of Virtual Education Trust,
payable at Delhi/ New Delhi.	
Enclosures : 1. Certificates (No	s.) 2. DDs (2 Nos.) 3. Identity Card

Signature of the candidate

(To be filled by candidate)