



# Sher-e-Kashmir University of Agricultural Sciences and Technology of Jammu

Space for recent passport size colour photograph

## ADMISSION FORM (To be filled by the candidate)

1. Admission No. : \_\_\_\_\_ Dated: \_\_\_\_\_  
 2. Notification No.: \_\_\_\_\_ Dated: \_\_\_\_\_  
 3. Faculty \_\_\_\_\_ Degree Programme \_\_\_\_\_

4. Name in full *As per Matriculation Certificate (in CAPITAL Letters)*:

FIRST NAME																				
MIDDLE NAME																				
SURNAME																				

5. Father's Name: \_\_\_\_\_  
*(As per Matric Certificate)*


6. Mother's Name: \_\_\_\_\_  
*(As per Matric Certificate)*


7. Date of Birth \_\_\_\_\_  
*(As per Matric Certificate)*

DD	Month	Year

8. Category under which admitted \_\_\_\_\_

9.10. State Domicile \_\_\_\_\_ 10. Nationality \_\_\_\_\_

10. Do you intend to be a Hostler/Non Hostler \_\_\_\_\_

11. Whether Fresh/Departmental Candidate \_\_\_\_\_

12. Permanent Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Ph.: \_\_\_\_\_ Mob: \_\_\_\_\_ E-mail: \_\_\_\_\_

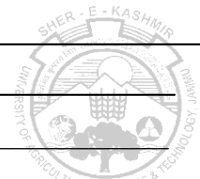
13. Address for correspondence: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Ph.: \_\_\_\_\_ Mob: \_\_\_\_\_ E-mail: \_\_\_\_\_

14. Whether belongs to Urban/Rural area: \_\_\_\_\_

15. Aadhaar No: \_\_\_\_\_

16 .Student NAD ID: \_\_\_\_\_



17. Name of local Guardian with address \_\_\_\_\_

18. Religion: \_\_\_\_\_

19. Father's Profession: \_\_\_\_\_ 20. Monthly Income: \_\_\_\_\_

21. Educational Qualification (Matriculation onwards):

Year of Passing	Examination Degree	Board/ University	Subjects taken	Aggregate Marks obtained/out of _____ or OGPA	Percentage of marks/ OGPA

22. Preference for games:

i) \_\_\_\_\_ ii) \_\_\_\_\_

iii) \_\_\_\_\_ iv) \_\_\_\_\_

23. For Departmental candidates only:

i) Department where working \_\_\_\_\_

ii) Date of appointment \_\_\_\_\_

iii) Post held with Scale \_\_\_\_\_

iv) Place of Posting \_\_\_\_\_

**Certificates/Testimonials attached with form:-**

- |   |   |
|---|---|
| I Four passport size recent colour photographs          | x Permanent Resident Certificate/State Domicile Certificate |
| ii Date of Birth Certificate                            | xi Category Certificate (if any)                            |
| iii Matriculation Mark sheet/ Diploma                   | xii Character Certificate                                   |
| iv 10+2 Mark sheet/Diploma                              | xiii Income Certificate                                     |
| v Bachelor's Degree Certificate/ Transcript/ Mark sheet | xiv NRI/NRI's Sponsored Category Certificate                |
| vi Master's Degree Certificate/ Transcript/ Mark sheet  | xv Migration Certificate                                    |
| vii Discharge Certificate                               | xvi Selection letter in case of Nominee of ICAR/VCI         |
| viii Relieving Order (for Deptt. Candidate)             | xvii Any other _____  |
| ix Affidavit of Gap period, if any                      |   |

**Declaration:-**

*I hereby solemnly and sincerely affirm that the information recorded above is true and correct to the best of my knowledge & belief and nothing has been concealed. In the event of any information found false or incorrect & detected before or after admission, SKUAST-J is authorized to cancel my admission and take any disciplinary action as may be provided under rules.*

*I undertake to abide by the rules & regulations of the University that may be laid down by the University Authorities from time to time during the period of my Studies.*

**Signature of Candidate**

Dated: \_\_\_\_\_



# Sher-e-Kashmir University of Agricultural Sciences and Technology of Jammu

## AGREEMENT

I \_\_\_\_\_ S/O D/O \_\_\_\_\_

R/O \_\_\_\_\_

Registered for \_\_\_\_\_ under admission No. \_\_\_\_\_

Session \_\_\_\_\_ affirm, that I will not resort to lockouts, strikes and unlawful means during the entire course of study in the University. I shall abide by the rules as laid in the Resident Instructions of the SKUAST – Jammu.

In case of any violation to the given instruction by the University Authorities, I shall be liable to be considered for discharge from enrolment at my own risk and responsibility.

Signature of Parents/ Guardian

Signature of the Candidate

Name \_\_\_\_\_

Witness:

1. Name \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Name \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SKUAST**  
Jammu

Chatha, Jammu, J & K 180 009, INDIA



Visit us at: [www.skuast.org](http://www.skuast.org)

**Contents for**  
**AFFIDAVIT**

I \_\_\_\_\_ S/o D/o \_\_\_\_\_  
do hereby solemnly declare & affirm as under:-

1. That I have been selected for \_\_\_\_\_ Programme of  
SKUAST-J for the Session \_\_\_\_\_ under \_\_\_\_\_ Category.
2. I understand and undertake that under \_\_\_\_\_  
Category, I have to pay Rs. \_\_\_\_\_ for the entire duration of the  
programme excluding normal dues, however for the sake of convenience I  
have been allowed to pay the fee @ Rs. \_\_\_\_\_ per annum.
3. That I understand to pay full amount of the prescribed fee under the said  
category for the entire duration of the programme. I undertake that I will not  
apply for migration to other University at any time during the course of  
study programme as I understand that in the said category migration is not  
allowed by the University.
4. I undertake that if I apply for migration during the course of my study  
programme I have to pay the full amount of the fee for the entire programme  
duration of the degree i.e. Rs. \_\_\_\_\_

Signature of the Deponent

Name \_\_\_\_\_

Witness: 1. Signature \_\_\_\_\_  
Name \_\_\_\_\_  
R/o \_\_\_\_\_

Witness: 2. Signature \_\_\_\_\_  
Name \_\_\_\_\_  
R/o \_\_\_\_\_

Place: Jammu

Dated: \_\_\_\_\_