



CENTRAL UNIVERSITY OF KASHMIR

Transit Campus: Sonwar, Srinagar – 190004

Registration Form for Availing Transport Facility

Name:

Parentage:

Gender:

Address:

Pickup point:

Mobile No:

Mobile No of Parent/Guardian:

Email ID:

Department:

Program:

Semester:

Enrolment No:

Recent passport
size photograph

DECLARATION BY THE CANDIDATE

I solemnly declare that the statements recorded by me in this application are true and complete to the best of my knowledge and belief and nothing has been concealed. I am aware that if at any stage, it is found that any statement made is not true or incomplete or is misleading, the transport facility, if made will be automatically cancelled and that I shall not be entitled to refund of any transport fee paid by me to the University. Further, I shall abide by the rules & regulations of the University in letter and spirit.

Signature of the Candidate

Place: _____

Date: _____