



DEPARTMENT OF RELIGIOUS STUDIES

CENTRAL UNIVERSITY OF KASHMIR

(Established under Central Universities Act 2009)

District Ganderbal-191201 J&K

APPLICATION FORM

Dated: _____

FORM OF CONSENT FOR EXPLORING ADMISSION

1. Name of the Candidate: _____
2. Parentage: _____
3. Residence: _____
4. Contact No.: _____
5. Email Id: _____ Category: _____
6. Qualifying Examination Marks: _____ %age _____
7. Programme Applied for: _____

*Self attested
Photograph*

I certify that the particulars given above are correct to the best of my belief and are based upon certificates/records issued by competent authorities. The admission shall be subject to my eligibility & overall merit and criteria prescribed by the University.

Signature of Candidate