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

(Annexure-A)
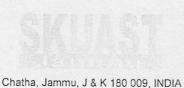
APPLICATION FORM FOR ADMISSION TO DIPLOMA IN AGRICULTURE/DIPLOMA IN HORTICULTURE

(Academic Session: 2024-25)

1. Application Fee Receipt No._____ Dated_____ Amount_____

2. Name Bank/Branch_____ UTRN No._____

3. Programme/Course in which admission is sought :_____

4. Name in full (in CAPITAL Letters):_____

5. Father's Name (in CAPITAL Letters): _____

6. Mother's Name (in CAPITAL Letters) _____

7. Date of Birth:

DD	Month	Year	Age as on 31-12-2024	DD	Month	Year

8. Place of Birth: _____

9. Mother Tongue:_____

10. Home district of Jammu Province:_____

11. Permanent address:

_____

_____

ContactNo._____ email:_____

12. Address for correspondence:_____

_____

Contact No._____ email:_____

13. Educational Qualification:

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

Space for recent passport size colour Photograph

14. Nationality: _____

15. Adhar no: _____

16. Category, if any: _____

17. List of enclosures:

   i)

   ii)

   iii)

   iv)

   v)

   vi)

   vii)

DECLARATION

      I hereby affirm that the information given by me in this application form is complete and true to the best of my knowledge and belief and that I have made this application with the consent of my parents/guardian.

Signature of Candidate

Dated:_____

Place:_____

TO BE FILLED BY THE EMPLOYER UT GOVT. EMPLOYEES

(FOR INSERVICE UT GOVT. EMPLOYEE CANDIDATES ONLY)

Certified that Mr/ Ms /Sh_____S/o/D/o_____

Working as _____ in _____

Department is hereby nominated for undergoing Diploma in Agriculture/Diploma in Horticulture for the academic session 2024-25 in SKUAST-Jammu.

Signature of the Officer/Employer