Sign of Student ----- Sign of Authorized Signatory





APPLICATION FORM (F-TEL PROGRAMS)

Extended NCR, Aligarh-Mathura Highway 33rd Milestone, Beswan, Aligarh - 202145 (UP), India Email: admissions@mangalayatan.edu.in Web: www.mangalayatan.in

Toll Free - 1800 274 4000

latest

INSTRUCTIONS

- 1. Read the Prospectus/Information Booklet carefully for Admission Procedure, Scholarships and Refund Policy.
- Use only Blue or Black pen to fill up the Form in English using CAPITAL/BLOCK LETTERS only.
- 3. Please keep a photocopy of the Form, before submitting, as a ready reference.

Program Applied -----

 Incomplete Form will not be Put Tick (✓) mark on applied of PROGRAM(S) APPLY 	course specialization.			Passport size Color Photograph		
B.A. (General)	B.A.(Hons.) Engl Economics /Poli Sociology		M.A. (English/History/Economics/ Political Science/ Sociology)			
B.Sc. (PCM/ZBC)	M.Sc. (Maths, Physics, Chemistry)		MBA (HR/Marketing/Finance/			
■ B.B.A.	☐ B.Com.	M.Com.	International Business)			
□ DCA	B.Sc. (IT)	M.Sc. (IT)				
BCA	☐ PGDCA	☐ MCA	Any other			
PERSONAL INFORM	ATION					
1. Gender (tick) Male	Female Othe	er Date of Birtl	n	(DD /MM/YYYY)		
Name of Applicant (As mentioned in Matric	culation Certificate)					
3. Father's Name						
4. Mother's Name						
5. Aadhar No.		6. Mari	ital Status			
7. E-mail id.						
8. Mobile No.		9. Wha	tssapp No.			
10. Category SC	ST OBC Ger	n Other	Nationality			
11. Religion Hindu	Muslim Sikh	Christian Jai	n 🗌 Other 🗌			
MANGALAYATAN UNIVERSITY BANGARANGAL Learn Today to Lead Tomorrow		Form Receipt		×		
関連機能対象 Learn Today to Lead Tomorrow Date			Application No.			
Name		Father's Name				

CONTACT	DETAILS	1								
Permanent Address (Don't Repeat Name)					Correspondence Address (If Different)					
City State			CityState							
Pin Code				Pin Code						
Permanent Mobile No. (On which all the important information to be delivered)										
Parent/Guardi	an Name		Parent Occupation							
Parent/Guardian Contact no				Email Address						
QUALIFYI	NG EXAN	INATION DETAILS*		·	0/	Vermof				
Examination	Degree	Board/University	Name o School/Col		% or Division	Year of Passing	Subjects			
High School										
10+2 or Equivalent										
Graduation										
Post Graduation										
Diploma										
Others				7	\					
* Self attested cop	oies of certifica	tes/marksheet should be atta	ched.							
Have you ap	peared in a	ny Entrance Exam	Yes (Pleas	e fill be	l <mark>ow details</mark>	s) [No			
Nar	ne of Exam	Year of <i>i</i>	Appearing		Roll No	0.	Percentile(%)/Score/Rank			
Payment details (r	annliaahla far d	ownloaded form only)								
						1				
Mode of Payment		Date	Amount		Name of the Bank					
DECLARATION hereby declare		ATE arefully read the instructions	s and all the info	rmations	furnished hy	/ me are co	rrect			
-		arefully read the motifications			-		neot.			
ʻarent s/Guardi ————	an Signature						Date			
			(FOR OFFICI	AL USE	ONLY)					
Admission el	igibility verifi	ed by	Employ	ee Code.			.Sign			



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