KALINGA UNIVERSITY

Application Form

Institute of Distance Education
Kalinga University, Raipur

Kotni, Near Mantralay, Naya Raipur - 492101, Chhattisgarh

Please fill in CAPITAL LETTERS

This form requests a significant amount of personal information. This is required so that we can decide on your suitability for the course you are applying for. The information you provide will be used for this purpose. It will be treated in confidence and will only be seen by those whose job require them to do so.

Course title (Code) ....

Session ....

Paste recent Passport Size Colour Photograph

1. Do not use digital or Computerized Picture.
2. Do not Pin or Staple the photograph
3. Do not Sign on the photograph.

Signature of Candidate

Personal Details

Title: Mr./Ms. ☐☐   Gender: Male ☐   Female ☐   Date of Birth | Day | Month | Year

First Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐   Last Name ☐☐☐☐☐☐☐☐☐☐☐

Aadhar No ☐☐☐☐☐☐☐☐☐☐☐☐

General ☐   SC ☐   ST ☐   OBC ☐   Marital Status   Married ☐   Single ☐

Father's Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Mother's Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Communication Address ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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City ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐   Post Code ☐☐☐☐☐☐

State ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Occupation: Self Employed ☐   Home Maker ☐   Private Job ☐   Government Job ☐

Employer Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Designation ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Address ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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Mob. ☐☐☐☐☐☐☐☐☐☐   STD Code ☐☐☐☐   Landline ☐☐☐☐☐☐☐

E-mail ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Blood Group ☐   Country ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Qualification Details:

Qualification	Name of the School / College	Name of Board / University	Year of Passing	Status Pass / Fail
10th				
12th				
Graduation				
Post-Graduation				
Any others				

Fee Details:

Demand Draft (DD) to be drawn in favor of "Institute of Distance Education Kalinga University" payable at Raipur.

Fee Amount Rs... D.D. No... Date...

Bank Name.. Branch Name...

Documents to be attached:

• For BA, B.Com, BBA, DCA - 10th Marksheet ☐   12th Marksheet ☐

• For PGDCA - 10th Marksheet ☐   12th Marksheet ☐   Graduation Marksheet/Degree ☐

• Address Proof : Aadhar Card or Voter Id Card or Driving Licence (any one to be attached)

Do you require printed copy of Self Learning Material.   **Yes** ☐   **No** ☐

(Cost of SLM Soft Copy in your login is free of cost)   (Cost of SLM Printed - INR 1000/- per semester)

Declaration (Please read each statement carefully and tick the checkbox to acknowledge that you have read, understood and agree to the terms below.)

☐ I certify that the information submitted by me in support of this application is true to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my admission is liable to be rejected/ cancelled at any stage of the program.

☐ I have read and understood all provisions of admissions and agree to abide by them. I also affirm that I fulfil the eligibility requirements for the course applied.

☐ In the event of submission of eligibility document from the unrecognized Board/ University, fraudulent, incorrect or untrue information or suppression or distortion of any fact, like educational qualification, marks, nationality, that if I found involve in any unlawful activity etc. I understand that my admission is liable for cancellation.

☐ I undertake to abide by the disciplinary rules and regulations of the University.

☐ Central / State Government employee to submit NOC from their employer within 15 days.

☐ I am clearly aware that I can join only one distance program at a given point of time.

Date ....

Place ....   **Signature of Candidate**

For Office Use Only
Check List

Candidate Name ☐	Proof of Educational Qualification 10th ☐ 12th ☐ Graduation ☐	
Course Name ☐	1 Passport size Photograph ☐	
DOB Proof ☐	Copy of National ID ☐	
Contact Details ☐		

Fees - Cheque ☐ DD ☐ Cash ☐ Online ☐ Specify Details.......................................

Eligibile for Admission   Yes ☐   No ☐

If **NO** (Specify Reason)...

Name ....   Date ....

Designation ....   **Signature**