



# Sangai International University

Paste latest coloured photographs of candidate

## Registration Form

Course Name:.....

1. Name in Full (Block Letters):.....

2. Contact No. (Mobile No.):..... E- Mail ID .....

3. Father's Name (In Block Letters):.....

4. Mother's Name (In Block Letters):.....

5. Date of Birth:.....

6. Address:.....

.....

7. Occupation:.....

8. Nationality:.....

9. Gender (Tick) Male ( ) Female ( )

10. State of Domicile.....

(In case of M.P. attach Proof)

11. Academic Qualification (Starting from X or Equivalent of the certificate)

S. NO.	Examination Passed	Name of Board/ University	Passing Year	Marks Obtained	% of Marks

### 12.A) Declaration by the Candidate

I declare that the information given above is true and complete to the best of my knowledge & belief, and if any of it is found to be incorrect my admission shall stand cancelled and I shall be liable to such disciplinary action as may be decided by the University. The decision of the University on shall be final.

Place \_\_\_\_\_

Date \_\_\_\_\_

Signature of the student

