



MONAD UNIVERSITY

Established by Uttar Pradesh State Government
Act. 23 of 2010 & U/S 2 (f) of U.G.C. ACT 1956

N.H. 24, Delhi Hapur Road, P.O. Pilakhuwa -245304
Distt. Hapur (U.P.) India

Paste a latest
Coloured Photograph
of Candidate and
attach 3 additional
copies also

ADMISSION FORM

For Session _____

Course _____ Branch _____ Semester _____

Student Details

First Name _____ Middle Name _____ Last Name _____
Date of Birth _____ Gender Male ___ Female ___ Trans ___ Nationality _____
Blood Group _____ Admission Status New Admission ___ Lateral Admission ___ Birth Place _____
Religion _____ Category General SC ST OBC Minority Muslim Other
Mother Tongue _____ PWD. Yes ___ No ___

Student Details

Mailing Address _____
Permanent Address _____ City _____
State _____ PIN Code _____ Country _____
Phone _____ Mobile _____ Email _____

Institution Last Attended (Details)

Institution Name _____ Qualifying Exam Name _____

Parent's Personal Details

Father's First Name _____ Middle Name _____ Last Name _____
Date of Birth _____ Education _____ Income _____
Occupation _____ Mother's Name _____

Parent's Personal Details

Mailing Address _____
Permanent Address _____ City _____
State _____ PIN Code _____ Country _____
Phone _____ Mobile _____ Email _____

Academic Qualification (s)

Examination Passd	Name of Board/ University	Year	Marks Obtained	% or Grade
High School				
10 + 2				
ITI / Dip				
Graduation				
Post-Graduation				
M. Phil.				

Utility

Hostel Required Yes _____ No _____ Transport Required Yes _____ No _____

Achievements

Co-Curricular Achievement(s) NCC _____ NSS _____ Sports _____ Cultural Activities _____ (Attach Proof)

Declaration by the Student

I hereby declare that the information given above with attachment (if any) is true and complete to the best of my knowledge, if any of the information found is incorrect then my admission shall be cancelled and shall be liable to such disciplinary action as may be decided by the University. The decision of the University there on shall be final.

Place : _____

Date : _____

Signature of the student

Declaration by Parent/ Guardian

I am undertaking the responsibility of paying all dues of my son/daughter regularly and I bound myself for his/her dues compliance with all rules and regulations that are in force from time to time in the University.

Place : _____

Date : _____

Signature of the Parent

Office Use only

Candidate is eligible for seeking admission in the above mentioned course. All the above information is Verified.

1. Signature of the Counselor
Remark if any _____

2. Signature of the Admission Officer
Remark if any _____

3. Signature of Honorable VC
Remark if any _____

Enclosures (Self attested) : Check list (Tick ✓ Whichever is Applicable)

1. Birth Certificate
2. Certificates and mark sheets of class X, XII and Graduation (**Which ever required**)
3. Permanent Residence Proof
4. Migration Certificate
5. Character Certificate
6. Original Cast Certificate Visible on the website of revenue www.bor.up.nic.in
7. Income Certificate in original Visible on the website of revenue www.bor.up.nic.in
8. Seven Passport size colour photos
9. Medical Fitness Certificate
10. Gap Certificate (if any during studies)
11. Two self addressed envelopes (With Stamp of Rs. 25/)
12. Anti Ragging affidavit by the student and parents/ Guardian

Note:- Please bring originals for verification and to keep in our records for one year
SI no. 1 to SI no. 8 are must for admission.