



CHAUDHARY RANBIR SINGH VOCATIONAL INSTITUTE OF PARAMEDICAL

Collaboration with UGC Approved University

REGISTRATION FORM

(Please fill this form in Capital Letters)

Paste
here
Latest
Coloured
Photo

- Note:** 1. Fill in this form in his/her own handwriting.
2. Course _____
3. Session _____

1. Candidate's Name: _____
2. Father's Name: _____
3. Mother's Name: _____
4. Date of Birth: _____
5. Postal Address: _____

- Distt. _____ State _____ Pin Code _____
6. Contact No.: _____ E-mail: _____
7. Category (General / OBC / SC / ST): _____ Sex (Male / Female): _____
8. Nationality: _____ Mode of Examination (Hindi / English) _____
9. Education Qualification: -

Sr. No.	Name of Examination Passed	Name of the Board / Institute	Subjects	Total Percentage %
1.				
2.				

10. Selected Subjects: -

Sr. No.	Subject Name	Subject Code
1.		
2.		
3.		
4.		
5.		
6.		

11. Additional Subject (if opted): -

Sr. No.	Subject Name	Subject Code
1.		
2.		

Declaration by the candidate: I declare that entries made by me in this form and the documents submitted by me are true in all respect and in any case, any information is found to be false shall entail automatic cancellation of my application besides rendering me liable to such action, as the CRSVIP deem proper. If I found guilty on any wrong information/documents I am liable to be punished appropriately. I have also gone through the syllabus and all the rules and regulation of CRSVIP regarding this examination. I have also gone through the constitution of board. CRSVIP is an also registered under NITI Aayog Govt of India and Haryana Registration and Regulation of Societies Act, 2012 (Haryana Act No. 1 of 2012) . After gone through all this information I also declared that in future I never claim against this board for any reason. I declare that the entries made by me in this admission Form are true in all respects and in case, any entry or information given is found to be false, this shall entail automatic cancellation of my admission besides rendering me liable to such action as the University may deem suitable. I note that my admission in the Institute and my continuance on its rolls are subject to the provisions of the Institute and any other rules and instructions, which may be issued from time to time. I shall abide by the rules of discipline and conduct, which may be framed in this regard. I have fully understood the regulations and directions for banning ragging and affirm that I shall not indulge and involve myself in any act of ragging. I also understand that, the fee mentioned is for 1st year only and may increase every year and that in case of withdrawal of admission by me after the last date of admission, it will be classified as a midcourse withdrawal .I have never been convicted court . Nor rusticated/expelled from any educational institution and nor disqualified/debarred from any examination. Admission and processing fee is non-refundable .

Date:

(Signature of the Parents / Guardian)

(Signature of the Candidate)

Documents Required for Admission / Registration:

1. Any Proof of Date of Birth.
2. Two Latest Coloured Passport Size Photo.
3. Original Migration Certificate of the last qualifying examination should be attached.
4. Photocopy of all the self attested certificates.

FOR OFFICE USE ONLY

Eligibility checked and found Eligible _____ Not Eligible _____ (give reasons) Full name of dealing Asst _____ Signature of admission officer _____ The Candidate is informed that his/ her application has been received and provisionally selected for admission.

Reg. No.

Sign. of Admn. Controller