

RE-REGISTRATION FROM – 2018 (JUNE EXAM)
MAKHANLAL CHATURVEDI RASHTRIYA PARAKARITA EVAM
SANCHAR VISHWAVIDYALAYA, BHOPAL

Enrollment No: Course:
Existing Year: Existing Semester:
Applying for Re- registration in Year:..... Applying for Re-registration for sem:.....

Name of Applicant : _____
Father's Name: _____
Address: _____

Mobile No.: _____ email ID: _____

(All columns are compulsory)

PAYMENT DETAIL

Details of fees deposited (to be filled in by the candidate)

CENTRE CODE: _____
Courses Fees _____ +Late Fees _____ =Total _____
Bank _____ Payable at _____
DD No. _____ DD Amount _____ Dated _____

DECLARATION

I, _____ declare that the information provided in Re-registration from above is true. My admission may pleased be cancelled if any information and documents given by me is found false, fake, counterfeit at any stage. In his case I also agree that university is empowered to cancel my admission & to revoke previously issued degree/ diploma/certificate or to take necessary legal action against me at any stage & university not be held responsible for any losses to students under any circumstances whatsoever & no fees will be refund by the university to me. All disputes will be settled in any court of Law established under jurisdiction of municipal limits of Bhopal.

Date: _____

Place: _____

Signature of Candidate

FOR CO-ORDINATOR USE

FOR UNIVERSITY USE

1. Verified by co-ordinator with seal:
(Signature with seal)

2. Re-registration approved by:

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