



VEERANARI CHAKALI ILAMMA WOMEN'S UNIVERSITY
KOTI, HYDERABAD – 500 001.

Cost Rs. 150/-

APPLICATION FORM (Instant) 2026

Form No. _____

B.A. ☐ B.Com. ☐ B.Sc. ☐ B.B.A. ☐

BLIND: YES ☐ / NO ☐ If Yes enclose the Medical Certificate

SEMESTERS :: VI MEDIUM ::

ROLL NO :

EXAM TO BE HELD IN: _____

NAME OF THE CANDIDATE: _____
(As per Board of Intermediate)

FATHER'S NAME: _____

MOTHER'S NAME: _____

ADDRESS: _____

COUNTRY: _____

MOBILE NO: _____

(Put a '✓' mark in the appropriate box)

AFFIX LATEST
PASSPORT SIZE
PHOTOGRAPH

LIST OF SUBJECTS	SEM VI	
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Course:

B.A.: _____ B.Com.: _____ B.Sc.: _____ B.B.A.: _____

(Please mention 'A' or 'B' for Paper VI/VIII of History, Public Admin., Sociology for B.A. Course.)

Fee Particulars : Rs : _____ IN WORDS _____

WITH LATE FEES (Rs. _____) CHALLAN No & DATE : _____

CANDIDATE'S SIGNATURE: _____

DATE: _____

Enclosures : Number of Photocopies: []