VEERANARI CHAKALI ILAMMA WOMEN'S UNIVERSITY

KOTI, HYDERABAD – 500 001.

Cost Rs. 150/-

APPLICATION FORM (Instant/Make-Up Test)

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: _____

AFFIX LATEST PASSPORT SIZE PHOTOGRAPH

COUNTRY: _____ MOBILE NO: _____

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

LIST OF SUBJECTS	SEM VI	
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1.		
2.		
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4.		
5.		
6.		
7.		
8.		
9.		
10.		

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: [ ]