



SR GROUP OF INSTITUTIONS

(AN ISO 9001:2008 CERTIFIED INSTITUTE)

KM 16., Ambabai, Gwalior Road, Jhansi

Managed by (Pt. Deendayal Upadhyay Shikshan Trust)

Approved by A.I.C.T.E. Govt. of India and Ministry of HRD

Tel. No:- 0510- 2730090, 6452650, 3730146, 6532847 Fax:- 0510-2730195

Form No.

REGISTRATION FORM

Affix
Recent
Passport
Photo

Roll No.	
Course	
Semester	
Branch	

SESSION : 2018-2019

SEMESTER : Odd/ Even

1. Name _____
2. Date of Birth _____
3. Email _____ Mob. _____
4. Father's Name/Guardian's Name _____
5. Mother's Name _____ Aadhar No. _____

6. Are you Hosteller Yes No

7. Have you taken Bus facility Yes No If Yes Pickup Point

8. Permanent Address _____

Pin

Tel

9. Local Guardian Address _____

Pin

Tel

10. CATEGORY SC ST GEN OBC OTHERS

11. STATUS REGULAR Re-Admitted EX-

12. STATUS OF FEE

PARTICULAR	DUES (Rs.)	PAID (Rs.)	BALANCE (Rs.)	REMARKS
College Fees				Sign.....
Hostel				
Bus				
Others old dues (if any)				
Total				

SIGNATURE OF STUDENT

SIGN. OF HOD

FINANCE OFFICER

REGISTRAR

CUT FROM HERE

REGISTRATION SLIP
(Candidate's Copy)

Form No.

SESSION : 2016-17

Roll No.	
Course	
Semester	
Branch	

SESSION _____ DATE

NAME _____