

ASSAM AGRICULTURAL UNIVERSITY

	Faculty:	
	APPLICATION FOR REGISTRATION OF STUDENTS INTO TH	IF LINIVERSITY
1.	Name of the candidate in full:capital) (The name should be in accordance with that of the HSLC or ec	(In block quivalent examination)
2.	Sex:	
3.	Father's Name:	
4.	Home Address in full:	
5.	Date of birth (according to HSLC Certificate/Admit card):	
6.	Contact Number:	
7.	Email:	
8.	Name of Last Examination with year she/he passed:	
9.	University/Board from which she/he passed with Roll & Number:	
10.	School/College which she/he passed from:	
11.	Class and date of admission in the class:	
12.	College Roll Number:	
13.	Registration No. of AAU (if any):	
14.	Address to which the Registration Card should be issued:	
		Signature of the applicant
_	stration fee paid/not paid/checked, arded and recommended	Signature of the applicant
	n/Assoc. Dean e Seal	
	For use in the Office of the Registrar	
	Assam Agricultural University stered under No Date	Rejected
		Registrar

Assam Agricultural University

N.B. (1) No action will be taken unless the registration fee is deposited.

(2) Students coming from other Universities or Boards should submit Migration Certificate from the University or the Board concerned along with this form.