



KARNATAKA SANSKRIT UNIVERSITY

PAMPAMAHAKAVI ROAD, CHAMARAJPET, BENGALURU-18

EXAMINATION APPLICATION FORM

(BA/MA./MPHIL/PHD/CERTIFICATE/DIPLOMA/
ADVANCE DIPLOMA /SAHITYA)

Please Tick (✓)the appropriate one

7073

Paste your recent
passport size
photo
to be attested
by Principal / HM

1. NAME OF THE CANDIDATE :
IN BLOCK LETTERS IN ENGLISH (AS IN SSLC MARKS CARD)
2. NAME OF THE FATHER :
3. NAME OF THE MOTHER :
4. DATE OF BIRTH (Enclose Proof) : Age
5. NATIONALITY : RELIGION : CASTE: SC/ST/OBC/GENERAL

(Caste Certificate should be attached)

6. Name of the College / School :
7. SUBJECT :
8. YEAR : I/II/III/I SEM/II SEM/III SEM / IV SEM / Not Applicable

(Please Tick (✓)the appropriate one)

9. DETAILS OF PREVIOUS EXAM QUALIFIED (Enclose Proof :

Registration Number	Name of the Course	Year of Passing	Name of the College

P.T.O.

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PAMPAMAHAKAVI ROAD, CHAMARAJPET, BENGALURU-18

HALL TICKET

REGISTRATION NO.

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NAME OF THE CANDIDATE

COURSE (BA or MA etc.) YEAR (I Sem or I Year etc.)

SUBJECT (Alankara or Vyakarna etc.)

Name of the Center and Code :

(Details below to be filled by the Invigilator)

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by Principal / HM

Date of the Exam									
Time of the Exam									
Signature of the Invigilator									

Signature of Principal / Head Master

Signature of the Director

