



Shri Shankaracharya Professional University, Bhilai (C.G.)

Established under Chhattisgarh Private Universities (Establishment and Operation) Act, 2005

EDRP NO.

FORM NO.

Instructions for Filling the Application Form :

Application Form to be filled in Capital Letters. # The form should be complete in all respects

1. PERSONAL DETAILS

Name

Gender: Male ☐ Female ☐ Trans ☐ D.O.B. ____ / ____ / ____

Category: General /ST / SC / OBC / Minority (Specify)

Specially Aabled: Yes / No ☐ Marital Status: Single ☐ Married ☐ Separated ☐

Blood Group Religion

Recent Passport Size
Photograph

2. CONTACT DETAILS

Permanent Address

City Pin Code State

Country

Correspondence Address (If Different)

Mob. 1 Mob. 2 Landline

Email

Passport No. Aadhar Card No.

3. FAMILY DETAILS

Father's Name:

Mother's Name:

Address:

Address:

Occupation:

Occupation:

Name of the Institution:

Name of the Institution:

Email:

Email:

Mob:

Mob:

Annual Income:

Annual Income:

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4. COURSE DETAILS

Programme: U.G. ☐ P.G. ☐ Ph.D. ☐ Certificate ☐ Diploma ☐ Mode: Part-Time ☐ Regular ☐ Lateral ☐

Branch /Course: _____ Specialization: _____

ACADEMIC QUALIFICATIONS

Qualification	Subjects	Name of School/College	Year of Passing	% / CGPA / Grade
X th (HSC)				
XII th (SSC)				
Graduation				
Post-Graduation				
Other				
Other				

5. ACHIEVEMENTS / EXTRACURRICULAR (ATTACH ADDITIONAL SHEET(S), IF NECESSARY)

Sports	Arts	Music / Dance	Academics	Others

6. EMPLOYMENT & WORK EXPERIENCE (ATTACH ADDITIONAL SHEET(S), IF NECESSARY)

Name of the Organization	Designation	Full Time or Part-Time	From		To	
			Month	Year	Month	Year

7. LOCAL GUARDIAN (For Candidates who are from other cities)

Name: _____

Address: _____

Relation: _____ Mob: _____

Alt. Mob. _____ Email: _____

8. FEE PAYMENT

Sponsor: _____ Self Sponsored ☐ Government Sponsored ☐ Other ☐

Note:- To be filled by the candidate applying through DTE counselling / Government Agencies.

9. ADMISSION DETAILS

* **B.Tech. / B.Pharm: Faculty Of Engineering & Technology / Faculty Of Pharmaceutical Science**

Entrance Exam	Roll No.	Merit Rank	Merit Marks
CGPET/CGPPHT			
JEE MAINS			
Branch Alloted <input type="text"/>			
Category Of Admission: C.G. <input type="checkbox"/> Other State <input type="checkbox"/> Others <input type="checkbox"/>			

* **MBA : Faculty Of Management Studies**

Entrance Exam	Roll No.	Merit Rank	Merit Marks
AICTE-CMAT			
Others			
Category Of Admission: C.G. <input type="checkbox"/> Other State <input type="checkbox"/> Others <input type="checkbox"/>			

MBA (Part Time) : Faculty Of Management Studies

Qualifying Exam	Year Of Passing	Total Marks	%age Of Marks	Total Working Experience	Remarks

* **MCA : Faculty Of Engineering & Technology**

Entrance Exam	Roll No.	Merit Rank	Merit Marks
CG Pre-MCA/NIMCET			
Category Of Admission: C.G. <input type="checkbox"/> Other State <input type="checkbox"/> Others <input type="checkbox"/>			

* **MCA : Faculty Of Computer Application**

Entrance Exam	Roll No.	Merit Rank	Merit Marks
CG Pre-MCA/NIMCET			
Category Of Admission: C.G. <input type="checkbox"/> Other State <input type="checkbox"/> Others <input type="checkbox"/>			

* **M.E./M.Tech/M.Pharm: Faculty Of Engineering & Technology / Faculty Of Pharmaceutical Science**

Qualifying Exam	Year Of Passing	Total Marks	%age Of Marks CGPA/CPI	GATE / GPAT Percentile/Experience	Remarks

10. BROTHER / SISTER (S) DETAILS

Number of Siblings:

Brother:

Sister:

Does any of Your Siblings Study / Studied at Shri Shankaracharya Professional University: Yes ☐ No ☐

(If Yes, Please Provide Details)

Name Branch / Course

Year of Admission Year of Passing Out

11. FACILITIES REQUIRED

1. Hostel Facility: Yes ☐ No ☐

(If Yes, Please tick the desired Option) : Two Sharing ☐ Three Sharing ☐ Four Sharing ☐

* Note – Subject to availability of rooms.

2. Transport Facility: Yes ☐ No ☐

Location to Commute From : (PLEASE CHOOSE YOUR SUITABLE LOCATION)

Raipur ☐ Kumhari ☐ Charoda ☐ Bhilai-3 ☐ Khursipar ☐ Power house ☐ Chhawani Chowk ☐ Risali ☐

Maroda ☐ Bhilai Sector Area ☐ Hudco ☐ Bhilai Nagar Railway Station ☐ Nehru Nagar ☐ Pushpak

Nagar ☐ Smriti Nagar ☐ Durg ☐

* Note – Subject to availability of seats.

12. LANGUAGE KNOWN

Language	Read	Write	Speak
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

13. PLEASE TICK THE AREAS IN WHICH YOU ARE / HAVE GOOD PERFORMANCE CONTRIBUTED IN PAST

Public Speaking ☐ Dramatics ☐ Singing ☐ Music ☐ Dance ☐ Training ☐ Electronics ☐ Robotics ☐
Computers ☐ Web Design ☐ Computer Programming ☐ Athletics ☐ Indoor Games ☐ Outdoor Games ☐
Event Organisation ☐ Teaching ☐ Calligraphy ☐ Painting ☐ Art & Craft ☐ Textile design ☐ Fashion
Design ☐ Interior Design ☐ Musical Instruments ☐ Swimming ☐ Networking ☐ Quiz ☐ Presentation ☐
Debate ☐ Social Work ☐ NSS ☐ NCC ☐

(SELECTION OF MORE THAN ONE OPTION IS PERMISSIBLE)

UNDERTAKING

I, _____ S/D/W/of Shri _____

Resident of _____

_____ here in after referred to as 'Student', seeking

admission in _____ Semester _____ Year _____

do hereby Solemnly affirm and undertake as under.

1. That, my Academic Qualification is as under: **(10th , 12th , Graduation etc.)**

S.No	Examination	Board / University	Year of Passing	Roll No.

2. That I have enclosed the self-attested copies of Eligibility Documents and the same are true and correct. In case they are found to be fake/fabricated / forged my admission is liable to be cancelled.

3. That I will regularly attend my scheduled classes physically or Online as Conducted and will overall maintain at least 75% attendance in my classes.

4. That in case I fail to maintain the aforementioned attendance in class, the University may take any action against me as per the rules of the University, including detaining/debarring me from Examination and/or striking off my name.

5. That I will maintain proper discipline, integrity and dignity in the University Campus and will behave appropriately with the Officers, Authorities, Faculty Members, Staff Members and students of the University.

6. That, in case I have not yet submitted my Original Transfer, Character and Migration Certificates issued by my last Institution/Board/University, I hereby undertake to submit the same within the next 30 days, failing which the University reserves all the rights to debar me from appearing in my Examination and cancel my admission without any refund.

7. That in case I cause any damage/breakage fully or partially to any property, article, equipment, apparatus belonging to the University, by mistake or deliberately, the University will have all the rights to recover the damages caused by me and impose a monetary fine on me, and in case of non-payment, University may cancel my admission or may take any legal action against me.

8. That during the entire duration of my course I will not take up any Regular Employment/Job in any Government, Semi-Government or Private Organization/Company/Enterprise/Authority. Further, I will not take up a part-time job of any nature during the University's scheduled working hours.

9. That during the entire duration of my course I will not enrol myself for any other Regular Course in any other University/College/Institution.

10. That I will neither indulge in any illegal, unlawful or criminal activity, ragging, tobacco, malpractice, misconduct, fraud nor will get involved in the consumption of liquor, drugs, smoking or any other kind of addiction in any manner in the University premises. In case I am found indulging in any of the above the University may take any legal action against me.

11. In case I fail to deposit my fees till stipulated the last date of payment of fee and in case of non-payment of a fee (whether full or partial) within 60 days after the last date my admission will be liable to cancel.

12. That my absence from my scheduled classes of more than 30 days without information can lead to my name getting struck off and readmission will be granted only at the discretion of the University and I will be liable to pay the Re-Admission fee.

13. That I would attend the University in prescribed University Uniform and carry and display my Identity Card issued by the University, every day, if unable to do so the University can initiate action as per rules and regulations.

14. That in case I am found travelling in the University Bus without due authorization and permission I shall be liable to pay the transport fee of the concerned route for the whole academic year.

15. That day scholar is not allowed to stay in the University hostel(s) without written permissions and authorization of the warden and senior authorities of the University. In case I am found at the Hostel Premises, I will be liable to pay a fine as decided by the University.

16. That my participation in any Dharna / Pradarshan / Strike can lead to strict disciplinary action against me including my rustication from the University.

17. That I will park my vehicle(s) in the University parking entirely on my own risk and in case of any mis happening to it i.e. theft, damage, breakage, loss etc. I will not claim any compensation from the University.

18. During my future visits on any educational/industrial tour or extracurricular activity if I sustain any injury or suffer an accident, Shri Shankaracharya Professional University or its staff will not be responsible for the same.

19. That I shall maintain proper discipline, peace and abide by the rules and circulars issued by the University from time to time and in case of any default by me the University can take action against me including cancellation of my admission and debarring my entry in the University Campus, Library, Sports Grounds, Mess, Canteen, Reception, Labs and Workshops.

20. Only for Students Availing Scholarships Offered by the University Under Various Categories

20.1 I seek admission aforementioned course of Shri Shankaracharya Professional University and I wish to avail of the scholarship offered by the University.

20.2 All the Eligibility Documents submitted by me for the availing aforementioned scholarship are genuine and the University reserves all the rights to cancel my said scholarship or may initiate civil/criminal proceedings against me if the documents submitted by me are found to be fake or forged.

20.3 I am fully aware and understand that to avail scholarship in the next semester/year, I shall have to abide by the following rules and regulations:

20.3.1 I shall maintain a minimum of 75% attendance in each Semester/Year, must appear in all the Class Tests in every Semester/Year and clear all my theory and practical examination on the first attempt.

20.4 I am fully aware and understand that in case I do not fulfil the above-stated rules and regulations no. 3.1, the University will have all the rights to reduce/cancel my scholarship

21. Only for Students seeking Admission Into M.Tech. Programme

21.1 I am fully aware and understand that M. Tech. The programme offered by Shri Shankaracharya Professional University is not approved by AICTE.

21.2 I am also aware that Shri Shankaracharya Professional University is a State Private University that does not require to take approval from AICTE to start any Technical Program as per Hon'ble Supreme Court of India in the judgement of Bhartidasan University Vs. AICTE case. I have received a copy of the RTI reply given by AICTE regarding point no. 1 and 2 above.

21.3 There are no relevant facts in this regards that are hidden or concealed from me.

21.4 I will not demand AICTE approved M. Tech. Programme or Degree now and in the future.

21.5 I have taken admission into M. Tech. Programme on my own after fully understanding all relevant facts and details in this regard.

22. Only for Students Availing University Hostel Facility

22.1 I am fully aware and understand that I have to pay Hostel Fee for complete One Year at the time of admission.

22.2 I undertake not to leave Hostel Facility before the completion of one year and will pay Hostel Fee for complete One Year.

22.3 In case I leave Hostel Facility before one year, I undertake to pay the complete Hostel Fee for the whole year.

22.4 I will abide with all the rules & regulations of the Hostel.

23. Only for Students Availing University Bus Facility

23.1 I am fully aware and understand that I have to pay Transport Fee for a complete One Year at the time of admission.

23.2 I undertake not to leave Transport Facility before the completion of one year and will pay Transport Fee for complete One Year. In case I leave Transport Facility before one year, I undertake to pay complete Transport Fee for the whole year.

23.3 I will abide with all the rules & regulations of the bus/Transport. The contents of this affidavit/undertaking are true and correct. I undertake to abide by all the above terms and in case any information, documents, facts, statements submitted/given by me in this undertaking are found to be false, fake, fabricated, wrong or forged and in my violation of any term, the University will have all the rights to cancel/withdraw/withheld my Mark Sheets/Degrees/Diplomas issued by it and the University may take appropriate legal actions against me in this regard including cancellation of my admission and debarring my entry in the University Campus.

24. Apart from the above mention undertaking, I shall abide by the rules and regulations decided by the University in future from time to time.

Date:

Place:

(Name & Signature of the Candidate)

I have personally read and understood the undertaking given by my ward.

Date:

Place:

(Name & Signature of the Parent)

VERIFICATION

I _____ Resident of City _____ of State _____

Of Country _____ do hereby verify that the contents of my above undertaking are true to me
personal knowledge and belief.

Signed and verified at _____ on this _____ Day of Year _____

Passport No / Aadhar No _____

Countersigned by Parent/Guardian _____

Signature of the Candidate _____

Place: _____

Date: _____

**** (This form requests a significant amount of personal information. This is required so that we may decide on your suitability for the course you have applied for. The information provided will be used for the same purpose. It will be treated as confidential and will only be seen by those whose job require them to do so)**

ANTI – RAGGING AFFIDAVIT LINKS FOR THE STUDENTS AND PARENTS

Details to be fulfilled by the students and parents for Anti-Ragging Affidavit as per Supreme Court of India and UGC norms.

1. https://antiragging.in/affidavit_university_form.php

SNo.	Student Details		Parent Details	
1.	First Name		First Name	
2.	Last Name		Last Name	
3.	Mobile No.		Mobile No.	
4.	Email Id		Email Id	
5.	Gender		Gender	
6.	City		City	
7.	State		State	
8.	Nationality		Nationality	

2. https://www.antiragging.in/undertaking_request.php

Reference Id : _____

Email Id : _____

Mobile No : _____

MEDICAL FITNESS CERTIFICATE

Name (in Block Letters) _____

Father's Name: _____

Blood group: _____

Height: _____ Weight: _____

Chest _____ Vision: L: _____ R: _____

Colour Vision: _____ Hearing: _____

Allergies, if any _____

Any other Remarks: _____

This is to Certify that after careful personal Examination of the Mr / Ms / Mrs. _____
is found physically fit to undergo professional education.

Place:

Date:

Signature with seal

Reg. No.: _____

Designation: _____

ONLINE CLASSES DECLARATION FORM

Declaration by the Candidate

I, _____ S/o/D/o/W/o _____

With Enrolment No. / EDRP No. _____ who is studying _____

Year _____ Semester _____ In degree / department of _____

In your University, do hereby declare that in case of any pandemic Situation or if directed by Govt., I shall join Online Mode of Classes and Assure you that no Violation of Rules, Regulation & Ethics of University will take Place during the Online Lectures. If any Misconduct is caused by me, University has all the rights to take suitable action accordingly.

Place:

Date:

(Signature of the Candidate)

Declaration by the Parent / Guardian

I, F/o/M/o/H/o _____ Mr/Ms/Mrs _____

With Enrolment No. / EDRP No. _____ who is studying in _____

Year _____ Semester _____ In degree / department of _____

In your University, do hereby declare that in view of Prevailing pandemic Situation, my ward has joined Online Mode of Classes and Assure you that no Violation of Rules, Regulation & Ethics of University will take Place during the Online Lectures. If any Misconduct is caused by my ward, University has all the rights to take suitable Action accordingly.

Place:

Date:

(Signature of the Parent / Guardian)

FOR OFFICE USE ONLY

CHECKLIST

❖ Candidate Name _____

❖ Course, Title & Semester _____

❖ DOB Proof

Matriculation Certificate ☐ Passport Copy ☐

❖ List of Original Documents:

Transfer Certificate ☐ Character Certificate ☐ Migration Certificate ☐

❖ Proof of Educational Qualification (Photocopy)

10th Certificate ☐ 10 +2 Certificate ☐ Graduation Certificate ☐ Provisional Degree ☐ P.G. ☐

❖ Proof of Employment

Experience Certificate ☐ Payslip ☐

❖ 4 Passport size Photographs ☐

❖ Copy of Aadhar Card ☐

❖ Gap Certificate (If required) ☐

❖ Copy of Entrance Exam Marksheet (If Any) ☐

❖ NOC (If Applicable) ☐

For International Candidates

❖ Copy of Passport ☐

❖ Copy of Visa ☐

❖ Copy of National ID ☐

Remarks : _____

Deficiencies / Remarks (if any)

1. _____
2. _____
3. _____

Admission Status: Provisional Admission ☐ Pending ☐ Cancelled ☐

Verified by the Admission Counsellor:

Name: _____ Signature: _____ Date: _____

Form Received and Checked by

Name: _____

Designation: _____

Signature: _____

Date: _____

Verified and Recommended for Admission by

Name of Department Admission Coordinator: _____

Remarks: _____

Date: _____

Signature: _____

Head of Admission Committee: _____

Date: _____

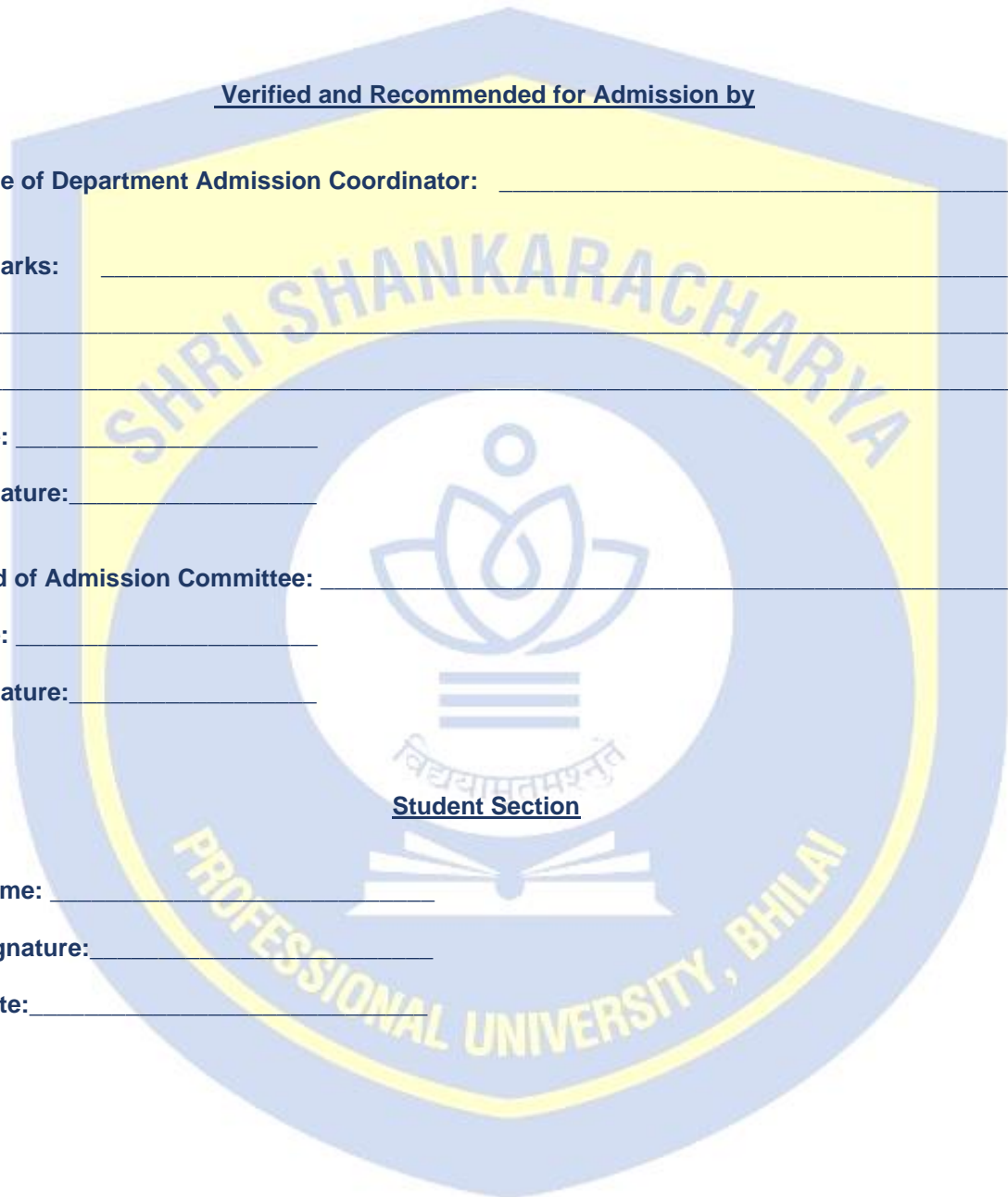
Signature: _____

Student Section

Name: _____

Signature: _____

Date: _____



FORM FOR PREPARATION OF IDENTITY CARD

STUDENT DETAILS

(All entries should be in capital letter)

Name _____

Student ID / EDRP ID _____

Degree _____

Branch / Specialization _____

Session _____

Date of Birth _____

Blood Group _____

Father's Name _____

Mother's Name _____

Present Address _____

Phone / Mob. _____ Alt Mob. _____

Email _____

Emergency Contact Details

Name _____

Address _____

Mob. _____ Relationship _____

Email _____

(Signature of the Candidate)

