

## COMMON APPLICATION FORM

Application Number:

For University Use Only Registration No.							Program of Study(Refer website:www.cmjumeghalaya.edu.in) Faculty of					
Student's File Number						Programme	Programme Name					
					Leave I							
Personal I	nform	ation										
Name							2	☐ Male [	□ Female			
(Exactly as it ap		the academi	c transcript	certificate of qualify	ing examination)			Lividio	April 1			
Mother's Nan	ne:									Passi	port	
Date of Birth: Permanent Hor		YYY	Y		Nationality:	Nationality:				Size Photo		
Line 1:												
Line 2: City/Town:						State:	State:					
Zip/Postal Co				71	17.75							
Post Office: Police Station:											100	
Mailing Ad	ldress	(If Differ	ent)			Guardia	in Addres:					
Line 1:	(11 5 11 10 1	JII.				Line 1:						
Line 2:						Line 2:  City/Town:						
City/Town: State:						State:						
Post Office:						Post Office: Police Station:						
Police Station						Folice 30	tion.					
Permanent H	ome Ph	one:				Mobile F	hone (self)		7		CTANCE OF	
				100 March 1997						47 YAY		
Academ	Program Name	rmation nme	School/ College	University/ Board/	Mode of Education	Medium of Examination	Year of Passing from to	%age Overal	Marks/CGPA/ I Grade(as	Compulsory Subjects(if prescribed in)	Verification (for Universit use only)	
				Council		Anstruction	from to	R.A., is	Marks/CGPA/ I Grade(as able)(Mention case result ad)	prescribed in)	use only)	
Matric or equivalent						1 41 200				3774		
10+2 or equivalent		772			Lane Service							
Diploma after matric				To the say of								
Bachelor's Degree										g said		
Post Grad. Degree						17/20-2						
Others Specify	993					7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					-	
Others Specify											1	
	TON (	Briefly list ar		ons, ac <mark>hievements,</mark> a <b>vel</b>		ou have received in		School / College		nition Level International	National	
2.												
3.												
FAMILY II	VFORM	MATION	This inform	nation is required for	or database our	nose only and will	not have any i	mnact on ad	mission proce	ecl		
Family Detai	ls	Full Name		Educational Level	Occupation	Annual Income (Rs.)	/Mobile No		lail Address	Employee ID	If working at CMJU	
Father												
Mother												
Sibling (Bro Sister)	other/											
Sibling (Bro	other/									19 1		
Sister) Guardian												
Any other												
7,7-7												
CMJU Alum Did your sil		udy at any	constitue	ent of CMJ Unive	ersity?	Yes [	] No					
				Sr. No.		Full Name		Progran	nme	Term		
Family mer	mbers s	studying at	CMJ Un									
CMJ Employ	yment			2.								
Are you an	emplo	yee of CM	J Univers	ity or its associa	ites or a depe	ndent of such a	n employee	?	Yes	□No		
PAYMEN	T DET/	AILS					ummumm		uuuuuuuu	anamananananananananananananananananana	umanumanum.	
Amount			14.00				PARTA.	D/D. N	0.:			
Cash:	150								Date:	D D W	M. Y. Y	
		is awarded	d as per t	he provision und	der sub-sectio	n (3) of section :	22 of the Un	iversity Gra	ants Commi	ssion Act, 1956		
Candidate	Name											
Date:												
Place:									(	Candidate's Sign	ature	
								nnominin	mannanaid			
Procedur	e of A	dmission:										

- 1. Fill up the Admission Form carefully.
  2. Attach copies of all certificates and marks sheets.
  3. Send the completed Admission Form along with four stamp size photographs and demand draft of the first instalment fees to the address mentioned above. Candidates can also pay by cash by visiting our office and authorized counselling centre.
  4. Fees once paid is non refundable.