

ANDHRA UNIVERSITY DIRECTORATE OF ADMISSIONS APPLICATION FORM

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Particulars of Demand Draft(s) enclosed towards registration fee (Rs.500/-) DD in favor of The Registrar, AU common Entrance Test & Admission Account. Date: _____ for Rs. _ Attested Photograph Name of the Course for which admission is sought : (Put √ Mark) (taken not earlier **AUDIO ENGINEERING & MUSIC PRODUCTION-2024** than 1-8-2024) Diploma Course PG Diploma Course Certificate Course 2. Name of the Applicant in full: (IN CAPITAL LETTERS): 3. Father / Guardian's Name: 4. Address for Communication: PIN:Tel. No. with STD Code Mobile No.: E-mail: 7. Residential status (put √ mark) 5. Gender: (put \(\square\) mark) 6. Date of Birth Foreign N.R.I. Month Year Indian Dav Male Female national 8. Reservation Category: Put √ mark in appropriate box (Enclose attested copies - See Information Brochure) 9. Minority Community to which LBC SC **EWS** you belong (Put√ mark) D Α C Muslim | Christian | Any other 10. Details of Qualifying Examination (Enclose Xerox copy pass certificate). Name of the **Overall % of Marks Year of Passing** Group University/Board Qualifying Exam. **CGPA** 11. Particulars of study for a period of seven consecutive academic years ending with the qualifying examination. Class studied (if you did not study Academic Name of the institution Place State during any year, specify reasons) Year No. 1. 2. 3. 4. 5. 6. 7.

DECLARATION

The particulars furnished above are true and correct to the best of my knowledge and I here by agree for the cancellation of my application / admission if any of the above details are found to be false.

Signature of the Applicant.

Station: Date: