

DIAMOND HARBOUR WOMEN'S UNIVERSITY

Notice

Date: 26-09-2023

Sub: Registration of newly admitted B.A. (Hons.), 2023 students.

This is to notify for all newly admitted B.A. (Hons.), 2023 students that the registration process will be commenced on and from **27st September, 2023 to 7th October, 2023**. They are directed to submit the filled in form to the HOD / Co-ordinator of the concerned department along with the following documents.

The following documents are needed during registration:

For B.A. (Hons.)

1. Filled up form (Application form for Registration is attached herewith)
2. Self attested copy of Marksheet and Admit/Certificate of Madhyamik Examination.
3. Self attested copy of H.S. Marksheet.
4. Self attested copy of Address proof (Aadhar and Voter / PAN card).
5. Self attested copy of Money receipts of UG admission.

Sd/-

Registrar

DIAMOND HARBOUR WOMEN'S UNIVERSITY

Application for Registration & Enrolment as a regular student of the University

(ALL COLUMNS MUST BE FILLED IN. IF ANY COLUMNS IS NOT APPLICABLE PLEASE

WRITE N.A.)

Affix recent passport
size (3x4 cm)
Photograph with in
the box without any
signature/attestation
/office seal

To
The Registrar
Diamond Harbour women's University

Through the HOD/Cordinatorof DHWU

in the Department of..... (Subject)

Sir/Madam,

I do hereby apply for Registration as a student of University. I furnish below the particulars relating to myself:

Name of the Course in which admitted:																							
1) S.C./S.T./O.B.C. (A/B):										2) PWD (Yes/No)													
3) Religion:										4) Specify Minority Community:													
5) Name of Student :										(*Leave one box blank after each word)													
(In Block letters as in M.P./equivalent examination)																							
6) Name of Father:																							
7) Name of Mother:																							
8) Name of Husband:																							

9) Permanent Address in full
(in block letters)

Pin Code..... Contact No.....

10) Date of Birth (According to
Admit Card/Pass certificate of
M.P./Equivalent Examination

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12) Registration No. with year of
the University/ Board/ institution of
in which studied last Number Session

Name of the Examination	Name of board/ Council/University with the name of the state where situated	Year of Passing	Class/ Division

15) E-mail of Student: _____

(Signature of Student in full)

Date :

(Signature with office seal of the HOD/Co-ordinator)