



For Office Use only

Note: 1) Incomplete Application or Application with insufficient Examination Fees will be Summarily rejected
2) Enclose attested Lower Degree Provisional pass certificate along with Application.

Hall Ticket No:
Examination Centre: _____

SRI PADMAVATI MAHILA VISVAVIDYALAYAM, TIRUPATI.

(Women's University)

(Form of Application for Registration to UG/P.G / P.G. Diploma Courses Examinations)

(COURSES THROUGH REGULAR)

1. Name of the Course :

2. Period of Study :

3. Name of the Candidate with surname :

(As Per lower Degree Certificate,
the Certificates of SPMVV shall be issued)

4. Name of the Father / Guardian :

5. Age and Date of Birth :

6 Nationality: Religion:

Caste: OC / BC / SC / ST

7. Permanent address for communication :

8. Phone or Mobile No.: Emai.ID:

9 Aadhar Number:
(Copy to be enclosed)

10 Fee Payment Details:

Note: 1.Postal Orders / Cheques / Money Orders / Mail Transfers will not be accepted.
2.The Whole Examination fee to be paid to the examination account No.174910100099755 of SPMVV Branch, Union Bank in the form of challan or through DD drawn in favour of the Registrar, S.P.Mahila Visvavidyalayam, Tirupati.

Challan/D.D.No.:

Amount: Rs.

Date of Payment :

Name of the Bank:

Place:

Signature of the Candidate

SRI PADMAVATI MAHILA VISVAVIDYALAYAM, TIRUPATI.

DUPLICATE HALL TICKET

Centre:

H.T.No. :

(Entries to be filled in by candidate and sent along with the application)

1. Name of the Examination :
2. Name of the Candidate in full :
(As per her lower Degree Certificate)

Semester / Year :

3. Papers for which appearing :

Theory

Practicals

Affix Photo
Duly Attested
by the
Identifying
officer

1
2
3
4
5
6
7
8

1
2
3
4
5
6
7
8

Head of the Department
University Office,
Tirupati.
Date :

Dean / Controller of Examinations

Signature of the Candidate

DEAN
University College

SRI PADMAVATI MAHILA VISVAVIDYALAYAM, TIRUPATI.

ORIGINAL HALL TICKET

Centre:

H.T.No. :

(Entries to be filled in by candidate and sent along with the application)

1. Name of the Examination :
2. Name of the Candidate in full :
(As per her lower Degree Certificate)

Semester / Year :

3. Papers for which appearing :

Theory

Practicals

Affix Photo
Duly Attested
by the
Identifying
officer

1
2
3
4
5
6
7
8

1
2
3
4
5
6
7
8

Head of the Department
University Office, Tirupati.
Date :

Dean / Controller of Examinations

Signature of the Candidate

DEAN
University College