



State University of Performing & Visual Arts

Department of Urban Planning and Architecture

Sector-6, ROHTAK (Haryana) Telephone: 01262-216485

Application Form for Physical Counseling / Admission to

FIRST YEAR, B. ARCH 2017-18

Application No..... (For Office use only)

HSTES ID/Roll No./MERIT SCORE/ HSTES RANK.....

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1. A. CATEGORY, AIC / HOGC / SC / BC / PH / EBP / SBC etc.:.....

B. NATA Score Year.....

C. Score (percentage) of qualified JEE (Main) Paper-2 -2017 (B. Arch./B. Planning)

Score Year.....

D. NATA Roll No./JEE (Main) Paper-2 -2017 (B. Arch./B. Planning) Roll No.....

(Fill only one, NATA Score/ JEE (Main) Paper-2 -2017 (B. Arch./B. Planning) that is preferred by the candidate. Filling both may lead to disqualification of application form.)

2. Name of Candidate (in block letters).....

3. (A) Father's Name (in block letters).....

(B) Mother's Name (in block letters).....

4. Date of Birth (dd/mm/yyyy).....

5. Address for correspondence.....

.....

PIN..... Student Email ID

Permanent Address.....

.....

PIN..... Parent/guardian Email ID

Affix a Passport Size Photograph (Attested)

Three Passport size photographs will also be required at the time of admission

Candidate Mobile No./Ph. No.....Parent's Mobile No.....

6. Details of Education Qualification:

Exam	Subject	Year of Passing	Name of Board /University	Maximum Marks	Marks Obtained	% of Marks
10 th						
12 th						

7. Detail of gap year (if any).....

DECLARATION BY THE CANDIDATE

I hereby declare that all the entries made in this form are correct. I further declare that I fulfill the minimum eligibility conditions laid down for admission. In case of detection of any false entry in respect of qualifying examination / Rank card my admission may be treated as cancelled at any time during the course of my study and I will have no claim for the fee, etc.

Date:

Place:

Signature of the Candidate

DECLARATION BY THE FATHER / GUARDIAN OF THE CANDIDATE

I certify that my son/daughter/wardhas applied with my Knowledge and consent. I hold myself responsible for his / her good conduct and its maintenance and payment of fees during the period he /she will be on the University rolls. My son / daughter / ward will not indulge in any act of ragging, and shall follow the code of conduct prescribed for students of the University.

Date:

Signature of Father/ Guardian

For office use only:

List of Documents:

Educational Qualification & School Certificates:

Matriculation Marks Sheet/DOB		10+2 Mark Sheet/Diploma Mark Sheet	
School Leaving Certificate		Character Certificate (Annexure-I)	
Nata Score Card		Student Seat Allotment Printout	
Haryana Resident Certificate (if applicable)		Haryana Govt. School Topper-HGST (Annx.-XVI)	
Migration Certificate			

Category: All India Category & Certificates

All India General		All India ST	
All India SC		All India OBC	

Category: Haryana Category & Certificates

HOGC		Haryana SC (Annexure-IV)	
Haryana BC-A (Annexure-V)		Haryana BC-B (Annexure-V)	
Affidavit of Backward Class by Parents (Annexure-VI)		Haryana Physically Challenged-OH/VH/HH (Annexure-VII)	
Haryana ESM/DESM/DFF (Annexure-VIII,IX,X)			

Medical Fitness and other Certificates, Anti Ragging & other affidavits:

Medical Fitness Certificate (Annexure-XI)		Undertaking by Students (Anti-Ragging) Annex.-XII)	
Undertaking by Parents (Anti-Ragging) (Annexure-XIII)		Annual Income Proof (if applicable)	
HSTES Counselling Fee Receipt		University affidavit by students & Parents	

Category

Amount Deposited in Rupees

Applicable Fee Amount

Report of Documents Verification Committee

We have verified all documents with originals and the above candidate is eligible for admission. Discrepancies (if any).

1.....2.....

3.....4.....

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Members admin. Committee

Chairman (Admission Committee)

Received sum of Rs.....vide receipt No.....

Dated.....from.....

Rank No.....on account of University semester fee and other charges for B.Arch. Course.

Signature of Cashier