

1. Name of the person or organization: _____	
2. Address: _____	
3. City: _____	
4. State: _____	
5. Zip: _____	
6. Date: _____	
7. Signature: _____	
8. Title: _____	
9. Phone: _____	
10. Fax: _____	
11. E-mail: _____	
12. Other: _____	

ALL INDIA VETERINARY UNIVERSITY
ADMISSION FORM

Registration No. _____ Roll No. _____

Name _____

Address _____

City _____ State _____ Pin Code _____

Mobile No. _____

Entrance Test Score _____

Test Name	Test Date	Score
1. Entrance Test	10/05/2019	100
2. Entrance Test	10/05/2019	100
3. Entrance Test	10/05/2019	100

Signature of Candidate _____

Signature of Parent/Guardian _____