

 **sri VENKATESWARA UNIVERSITY**
Registration/Admission Form
 Sri Venkateswara University
 Tirumala Tirupati Devasthanams



Registration Details

Name: _____
 Date of Birth: _____
 Sex: ☐ Male ☐ Female
 Religion: _____
 Caste: _____
 Address: _____
 City: _____
 State: _____
 Pin: _____
 Mobile: _____
 E-mail: _____

Academic Details

Grade: _____
 Roll No: _____
 Class: _____
 Section: _____
 Teacher: _____
 School: _____
 District: _____
 State: _____
 Pin: _____
 Mobile: _____
 E-mail: _____

Declaration

I hereby declare that the above information is true and correct to the best of my knowledge and belief. I agree to abide by the rules and regulations of Sri Venkateswara University.

Signature of Candidate _____
Signature of Parent/Guardian _____
Signature of School/Institution _____

Stamp of School/Institution _____

Formulario de Registro de la Empresa

Nombre de la Empresa: _____

Dirección: _____

Ciudad: _____

País: _____

Fecha de Registro: _____

Firma del Representante Legal: _____

Sello de la Empresa: _____