



MOBILE

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EMAIL

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AADHAR NO.

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STUDENT'S 📞 NO.

+91															
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8. MAILING ADDRESS

 SAME AS PERMANENT ADDRESS


CITY

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STATE

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PIN CODE

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TELEPHONE

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MOBILE

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EMAIL

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## 9. EDUCATIONAL QUALIFICATION

Examination	Roll No.	Year of Passing	Board/ University	Subject Offered	% of Marks	Division/ Grade
10th Std./ High school						
SSC/(10+2)/Inter						
Under graduation						
Post graduation						

## 10. ANY OTHER PROFESSIONAL QUALIFICATION / DIPLOMA

Name of Professional Qualification/Diploma	Year of Passing	Board/ University	% of Marks	Division/ Grade	Experience in Months/ Years

11. ABC (ACADEMIC BANK OF CREDIT) ID NO.  
IF AVAILABLE

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12. DO YOU HAVE ANY PHYSICAL DISABILITIES? (✓)  YES NO13. DO YOU HAVE ANY MEDICAL CONDITION OR LEARNING DISABILITY THAT MAY REQUIRE SPECIAL ATTENTION DURING THE COURSE ?  YES NO

IF YES, PLEASE SPECIFY .....

14. HAVE YOU EVER BEEN AFFILIATED WITH ERA UNIVERSITY IN THE PAST ?  YES NO

IF YES SPECIFY DURATION FROM ..... TO .....

NAME .....

EMPLOYEE ID .....

OR ENROLLMENT NO. ....

WORK EXPERIENCE

15. ARE YOU CURRENTLY EMPLOYED ?  YES  NO

TYPE OF WORK  INTERNSHIP  VOLUNTEERING  UNPAID  PAID

NAME OF THE ORGANIZATION / INSTITUTION ..... JOB TITLE .....

PARENT/GUARDIAN DETAILS

16. FATHER'S NAME

Grid for entering father's name (two rows of 20 boxes each)

MOBILE

Mobile number input field (starts with +91)

EMAIL

Email address input field

OCCUPATION

Occupation input field (20 boxes)

17. MOTHER'S NAME

Grid for entering mother's name (two rows of 20 boxes each)

MOBILE

Mobile number input field (starts with +91)

EMAIL

Email address input field

OCCUPATION

Occupation input field (20 boxes)

18. NAME OF GUARDIAN / LOCAL GUARDIAN

Grid for entering guardian name (two rows of 20 boxes each)

MOBILE

Mobile number input field (starts with +91)

EMAIL

Email address input field

OCCUPATION

Occupation input field (20 boxes)

QUALIFICATION

Qualification input field (20 boxes)

19. HAS YOUR GUARDIAN OR ANY OTHER KNOWN PERSON WORKED AT OR IS WORKING AT ERA UNIVERSITY ?

YES  NO

IF YES SPECIFY DURATION FROM ..... TO .....

NAME .....

EMPLOYEE ID .....

RELATION .....

## DECLARATION BY THE CANDIDATE

I ..... S/o or D/o ..... declare that the information furnished by me herein is true and correct. In case any information furnished herein is found to be incorrect or any document is found to be forged, I agree to forego my claim for admission and abide by the decision of the University authorities.

I further certify on oath that there is no criminal case pending in any Court of Law against me.

I further declare that I have fully read the prospectus furnished with the application form and understood the contents therein clearly and I hereby undertake to abide by the conditions prescribed therein.

PLACE :

Date :

Signature of the candidate

20. LIST OF ENCLOSURE :

POST GRADUATE APPLICANTS ARE INSTRUCTED TO ENCLOSE THE FOLLOWING DETAILS:

S.no.	Particulars	✓/X
1	Self Attested ID & Address Proof (Aadhar No.)	
2	4 Photographs	
3	Self Attested copy of SSLC Mark Sheet	
4	Self Attested copy of 10+2 Mark Sheet	
5	Self Attested copy of UG Degree (or) Provisional Certificate	
6	Caste Certificate	
7	Disability Certificate	
8	Any other certificate (Professional Qualification/Diploma)	

Signature of the Candidate

**Note:**

- The candidate must ensure that application is complete and all the necessary documents enclosed before submitting the application.
- Incomplete application submitted without enclosing any necessary documents will not be accepted. No interim correspondence will be made.

The duly filled application should be submitted in person or by post to:

The Admission Cell,  
Era University,  
Safarazganj, Hardoi Road,  
Lucknow-226003