



VEERANARI CHAKALI ILAMMA WOMEN'S UNIVERSITY
KOTI, HYDERABAD – 500 001.



APPLICATION FORM (Backlog/Improvement)

Cost : Rs. 100/-

B.A. ☐

B.Com. ☐

B.Sc. ☐

BBA ☐

Form No. _____

BLIND: YES ☐ / NO ☐ If Yes enclose the Medical Certificate

SEMESTERS :: I, II, III, IV, V, VI **MEDIUM ::** **ROLL NO :**

EXAM TO BE HELD IN: _____

NAME OF THE CANDIDATE: _____

(As per Board of Intermediate)

FATHER'S NAME: _____

MOTHER'S NAME: _____

ADDRESS: _____

COUNTRY: _____

MOBILE NO: _____

(Put a '✓' mark in the appropriate box)

AFFIX LATEST
PASSPORT SIZE
PHOTOGRAPH

LIST OF SUBJECTS	SEM I		SEM II		SEM III		SEM IV		SEM V		SEM VI	
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CBCS –ADD ON COURSE												

Course:

B.A.: _____ B.Com.: _____ B.Sc.: _____

(Please mention 'A' or 'B' for Paper VI/VIII of History, Public Admin., Sociology for B.A. Course.)

Fee Particulars : Rs : _____ **IN WORDS** _____

WITH LATE FEES (Rs. _____) CHALLAN No & DATE : _____

CANDIDATE'S SIGNATURE: _____

DATE: _____

Enclosures : Number of Photocopies: []

NOTE: Submit One Extra Photograph along with the Application Form & write the Roll No. on backside of the photo.