



**Shoolini Institute of Life Sciences and Business Management
(Affiliated to Himachal Pradesh University, Shimla)**

Anand Campus, The Mall, Solan – 173212 (H.P) Tel. 01792 – 226674

Admission Cum Registration Form

Session _____

(for details please consult prospectus) No Column Should Be Left Blank

Admission form No: _____

Category of application

Gen SC ST NRI/Sponsored

Course applied for _____

Enrollment No. _____ (To be filled by the institute)

1. Name of the Candidate _____ (In block letters)

2. Father's Name _____ (In block letters)

3. Mother's Name _____ (In block letters)

4. Date of birth _____ (In figures)

_____ (In words)

5. Male/Female _____

6. Permanent Address _____

_____ PIN _____

7. Address for correspondence _____

8. Telephone No. (If any) _____

9. E-mail ID (If any) _____

10. (a) Academic Qualification

Examination	University/Board	Year	Subjects	Marks Obtained	Maximum Marks	Result with percentage

(b) Whether disqualified from any examination

YES NO

Affix your duly attested latest passport size photograph

11. List of documents attached

- a) _____ d) _____
b) _____ e) _____
c) _____ f) _____

Note: Candidates are required to attach the attested photocopies of the following documents (originals are required for verification at the time of admission. Attestation should be done by a Gazetted Officer/Notary Public/Bank Manager/Magistrate)

1. Certificate & detailed mark sheet of the qualifying examination.
2. Three passport size attested photographs.
3. Certificate from competent authority, if belong to SC/ST and other category.
4. Certificates pertaining to extracurricular activities.
5. Character certificate from last Institute attended.

Declaration: I shall abide by the rules and regulations of the Institute and shall not indulge in any unlawful and undesirable activities

Date _____

Place _____ Signature of the candidate Countersigned (Parent/Guardian)

Anti-ragging Declaration by student and parent/ Guardian

I/we am/are fully aware of the orders of the Government and of Hon'ble Supreme Court on the Anti-Ragging measures. I/we hereby affirm that if found guilty of ragging, I _____ (name of candidate) son/ daughter of _____, am liable for punishment as per anti-ragging law. Furthermore in case this declaration is found to be untrue, we are aware that the present admission is liable to be cancelled.

Date _____ Signature of Candidate Signature of Parent/ Guardian

Place _____ (Name _____)

Hostel Accommodation Required Not Required

Signature of the candidate Countersigned (Parent/Guardian)

(FOR OFFICE USE ONLY)

Certified that the candidate has attached all the documents enlisted above. He/She is eligible/not eligible for admission.

Admission Cell

Recommendation for Admission

Admitted

Dean (seal)

President (seal)