

# Re-Registration Form

MAHARSHI DAYANAND UNIVERSITY, ROHTAK  
DIRECTORATE OF DISTANCE EDUCATION

ADMISSION-CUM-EXAMINATION FORM

Session: **JULY 2012**

**NO COLUMNS SHOULD BE LEFT BLANK**

Enrolment No.: .....

Name of Programme: ..... Semester: ..... Specialization.....  
(For MBA Students only)

Name of the Study Centre (SC): **KENT Institute of Higher Education** SC Code: **08617**

1. Name of the candidate:  
(In block letters) \_\_\_\_\_

2. Father's Name:  
(In block letters) \_\_\_\_\_

3. Mother's Name: \_\_\_\_\_ Date Of Birth \_\_\_\_\_  
(In block letters)

4. **Contact Number:** \_\_\_\_\_

5. Session of Last Exam: \_\_\_\_\_ Last Exam Roll No.: \_\_\_\_\_

6. Mode of Payment: **Cash** (Receipt No.) \_\_\_\_\_ Amount \_\_\_\_\_ Cheque \_\_\_\_\_

OR

**Bank Draft** No. .... Dated ..... Amount Rs.....in favour of **Finance Officer, M.D. University, Rohtak** payable at **ROHTAK**. Please write Name, Address & Course applied for on the back of the bank draft.

OR

**Deposited in STUDY Centre Account :**

- (i) ICICI Bank A/c No. 628605012190 favouring "KENT Institute of Higher Education" Ghaziabad
- (ii) SBI Bank A/c No. 30261034096 favouring "KENT Institute of Higher Education" Ghaziabad

Through \_\_\_\_\_ deposit in \_\_\_\_\_ on \_\_\_\_\_  
(online or manual) Bank Name Date of Deposit

Date:

(Signature of the Candidate)

(Signature of the dealing authority at Study Centre)

**HELPLINE NO.: 9911303050, 9911303070**