

Please fill in Capital Letters

Course _____ 2. Admission Year _____ 3. Session _____

STUDENT DETAILS:

Student First Name: _____ Middle Name _____ Last/ Surname _____

Date of Birth: ____/____/____ Male / Female Religion _____ Blood Group _____

Nationality _____ Passport No.: _____

Date of Issue: _____ Date of Expiry: _____

Mobile No.(+ _____) _____, India No. _____

E-mail ID: _____

PARENT / GAURDIAN DETAILS:

Fathers Name: Mr. _____ Mobile No.: (+ _____) _____

E-Mail ID: _____

Work details: Organization _____ Designation: _____

Mothers Name: Mrs. _____ Mobile No.: (+ _____) _____

Work details: Organization / Home Maker _____

PERMANENT ADDRESS:

Village / H. No./ Road _____ Block/ Town/ City: _____

Area / Distt.: _____ Post Office: _____ Postal / Pin Code: _____

State _____ Country: _____

IN CASE OF EMERGENCY CONTACT DETAILS:

Person Name: _____ Relation: _____ Mobile No.:(+ _____) _____

Any Friend/relative already studying in VJES: _____ Course: _____

ACADEMIC DETAILS:

CLASS	YEAR	BOARD/UNIVERSITY/AWARDING BODY	STREAM	MARKS (%)
High School / 10 th / GCSE 'O' Level				
12 th /Higher / Senior Secondary / GCSE 'A' Level				
Diploma if any				
Bachelor				
Post Graduation if any				

WORK DETAILS

From	To	Company	Position Held

Latest colour passport size
photograph with
white background
Don't staple

(Signature of the student)

(Signature of the Parent/Guardian) Date : _____
(Compulsory in case of candidate being minor)

TELL US, ABOUT YOU:



A) Any Academic honors Achieved: _____

B) Extra-Curricular Activities: e.g. Sports, drama, debate, leadership roles, games, music, poetry, publication: _____

C) Do you need Hostel: Yes No

D) Where will you prefer hostel: Chandigarh Derabassi

E) Do you Smoke: Yes No

F) Do you Drink Alcohol: Yes No

G) Are you Vegetarian Non-Vegetarian

H) Have you ever taken Drugs: Yes No

I) Have you Traveled International? If yes to which country? _____

J) Do you have any handicap / Medical ailment? _____

DOCUMENT CHECKLIST:

<u>ACADEMIC</u>	Submitted on	Pending	<u>LEGAL</u>	Submitted on	Pending
10th / High School/ O Level Mark Sheet			Latest Passport size photo		
10+2 / Senior Secondary / A Level Mark Sheet			Passport		
Diploma if any			Police Clearance certificate		
Bachelor			Parent Bank Statement		
Master			Medical		
			Health Insurance		

Financial details:

Onetime Registration amount: _____ (USD) Payment Details: Amount _____ Date: _____

Trn Details: _____

Annual fee _____ (USD) Scholarship _____ (USD) Net annual Fee _____ (USD)

Any Other information:

(Signature of the student)

(Signature of the Parent/Guardian) Date : _____
(Compulsory in case of candidate being minor)



I hereby undertake / declare / certify that:

1. **Course Confirmation:** I am applying for the course of: _____ at Chandigarh Vidya Jyoti Eduversity and I confirm to abide my admission rules and regulations mentioned in Offer Letter / Provisional Admission Letter / updated on website/ mentioned below and notified time to time.
2. **Fee Commitment:** I Agree to pay the fee to VJES (USD / Rs. _____) Per Year / Offer Letter / PAL/ as per Institute Policy/structure.
3. **Fee Liability on Withdrawal:** I am liable to pay my fee even if I leave in between the course for the whole year
4. **Original Documents:** That in case I am paying my fee in installments and for security purpose I am depositing my original documents. They will be released on clearance of my dues (minimum 1st Year).
5. **Fee Non-Refundable:** I confirm that the fee / allied charges once paid are not refundable / transferable other than mentioned in the refund policy.
6. **Awareness of Fee Components:** I am fully aware that fee and charges include University/awarding body fee, tuition fee, Food material costs, Practical Cost, Training fee, Admission fee, Continuation fee, Development charges, Books & Periodicals, Journals (5 Max per Sem) Library Charges, Lab Charges, Educational tours, Water & electricity charges, Building Charges, Uniform (to be issued as specified in Student handbook) and University/awarding body reg & exam fee. It also includes extra timings / classes / materials and other value-added services provided to me by VJES apart from those specified by the university/awarding body/ awarding body.
7. **Charges Not Included:** I am further aware that Fee and charges don't include certain part of uniform, educational tours / visit expenses, hostel/accommodation and transportation charges.
8. **Timely Fee Payment:** I agree to pay my dues on the time as specified by the VJES otherwise the management can issue fine/ charge interest and even stop my education in between and can even stop university/awarding body from providing services to me.
9. **Right to Revise Fee:** VJES reserves the rights to enhance the fee / allied charges during the course as per notification of university/ awarding body and the fee mentioned in PAL can change accordingly.
10. **Place of Study:** I have the consent of my parents, for taking admission. I am also aware that the classes are presently conducted at VPO Gholumajra, Chandigarh- Ambala Highway and in future, the classes can be conducted at any other campus/ facility of VJES. That I have to arrange for my transportation separately. Further VJES is not responsible for my safety during traveling.
11. **Medical Fitness:** I am medically fit and have no communicable and serious diseases like that or fits/any sort of attacks/otherwise and I shall be liable to pay for any expenditure incurred by the institute on my treatment for any lines / disease / personal injury or otherwise due to any reason during the course of my study at the institute.
12. **Compliance with Rules:** I agree to abide /maintain the rules & regulations of VJES within and outside the precincts of the institute, or any act which is detrimental to the interest of the institute or as mentioned in student handbook or specified / notified from time to time. I have read and understood all the rules, regulations, terms & conditions of the VJES given in the student handbook (available on VJES website and Hard copy in my welcome Kit).
13. **Accuracy of Information:** That the information given is correct. Any wrong / misleading information (written / verbal) may lead to action against me.
14. **Attendance:** I am aware that I have to achieve required attendance otherwise I may be stopped from appearing in university/awarding body exams. I may also have to re-sit in same semester for another term at an extra cost of 50% of the prevalent semester fee.
15. **Program Status:** I am also fully aware about the status with regard to recognition / academic value / programs / course/ authenticity of the diploma / degree to be issued to me. I am also aware that the courses by the awarding bodies are conducted Full time / Regular. I am also aware that VJES Management / Principal are running programs /courses on behalf of various other awarding institutions, and act on their instructions only and are not responsible for any acts, deeds, decisions of the University/awarding body or any other awarding Institution.
16. **Commitment to Complete Course:** I shall study at the institute for the complete duration or the program opted for and if due to any reason, I leave/withdraw at any time before the completion of program I shall be liable to pay the fee for all the successive terms and other pending dues, if any.
17. **Training & Industry Exposure:** I am also aware that I may have to undergo Summer/ Industrial Training/ Internship in a reputed organisation during the course, that assistance will be provided to me for the above, I will be solely responsible for my accommodations, work performance, safety during the training. I will not do anything which will affect the reputation of the VJES. The institute is entitled to make mandatory for me, as a student of the Institute, to carry out the research, training, industrial visits, seminar, study tours and other activities, in or outside the institute, related to my course of study or otherwise and other co-curricular, extra-curricular and such other cultural, development, training & placement and other activities, and to charge the additional fee and charges for such activities besides the transportation and other charges, as decide by the institute.
18. **Placement:** I hereby confirm/clarify that I haven't been given any sort of placement guarantee. Indian Govt. Doesn't allow foreign nationals to work in India. However, for international placement it will depend on my efforts/academic performance/ learning / behavior in the institute.
19. **Institute Authority:** The institute has the full authority to call me / send for official/ academic purpose any time even during holidays or for early or delayed stay even during nights.
20. **Disciplinary Jurisdiction:** I submit myself to the disciplinary jurisdiction of the institute. The Institute in such case, may discontinue may stay in the institute and I shall not be entitled for any refund of admission fee, bus fee and any other fee/charge paid to the institute and I shall also be liable to pay the pending fee, dues, penalty, etc
21. **Prohibition on Intoxicants:** I shall not possess, use of deal with any kind of intoxicating material including alcohol, drugs of any kind, gutka, sedative materials and on being found guilty, the institute may take any disciplinary action(s) including rustication/expulsion against me.
22. **Anti-Ragging Compliance:** I am fully aware about laws pertaining to Anti Ragging, Sexual Harassment, Discrimination / indiscipline / mis-behavior/ hooliganism etc. I undertake that I will not involve in any kind of Ragging. That in case I am found indulging in the ragging activity. Action against me can be taken under the laws.
23. **Damage to Property:** I shall be liable to pay for any damage caused by me to the property of the institute either alone or jointly with other and face disciplinary action.
24. **Submission of Documents:** It shall be my responsibility to sign and submits all the forms, affidavit(s), information and other documents, as may be required by the institute from time to time: Such declaration(s) or affidavit(s) or undertaking(s) or any other document(s) as prescribed, even if unsigned by me, will be winding on me for all the matters concerned.

25. **Weapons and other Dangerous materials Prohibition:** I shall not possess, use or abet the use of any kind of weapons including sticks, rods, explosives, firework or any such material and on being found guilty, the institute may take any disciplinary action(s), including rustication/expulsion, against me.
26. **Personal Belongings:** I shall not keep excess cash and valuables with me and in case of any loss or damage of cash or valuables, including mobile phones, PC, laptop or any other personal belongings, the institute shall not be responsible for any kind of compensation.
27. **No Unauthorized Collections:** I shall not collect any money from any student(s), employee(s) or other person(s) for any purpose including donations, contributions/gathering without the written approval of the institute.
28. **Intellectual Property:** I understand that all tangible and intangible things including the books, software, new technologies, formula, study material including notes, slides, papers, CD's formulations, drawings, paintings, photographs, sculptures, design, models, audios, videos, films and other materials developed by me (individually or jointly with others) during the course of my study at the institute will invariably be the property of the Institute and all rights including copyrights, patents, trademarks, intellectual property rights, publishing, selling, transferring, parting, with assigns to broadcasting, telecasting and printing, shall lie with the institute without any compensation to me. All my audios, videos, photographs, films, and like thing made during my course will be the property of the institute and the institute can use the same for any purpose even after my leaving the institute, for which no further consent is required.
29. **Suicide/Threat Clause:** I do not have the tendency, and shall not make any attempt, to commit suicide or abetting or inciting any other person to commit suicide or anything unwarranted and/or prohibited by law or otherwise and shall not give any sort threats to commit suicide or likewise and on being found guilty of the aforesaid action, I myself shall be responsible for any consequences under law and the expulsion/rustication from the organisation / institute and any other legal action under the law of land. The institute shall not be responsible for the same. I shall be responsible to take care of my personal belonging in the institute and in case of any loss or damage to any of such personal belongings; The institute shall not be responsible for any kind of compensation or otherwise.
30. **Other Matters:** For any unforeseen issue arising, that is not covered by the undertaking, or in respect of all the matters, not expressly provide herein, the institute may take an appropriate decision that shall be final and binding on me and all other concerned.

(Signature of the student)

(Signature of the Parent/Guardian)

Date: _____

INDEMNIFICATION

31. I, hereby indemnify the VJES management from and against all proceedings and claims for any or on account of or in relation to any disability, bodily injury (Self-inflicted or otherwise), suicide and/or suicide attempt, death, infections and diseases caused by any insect-bites, animal-bite, plant-bites or otherwise (in or outside the campus of the Institute) and from and against all damages, losses, costs, charges and expenses in respect thereof, in any manner due to any reason, whatsoever, that my son/daughter may suffer during his/her course of study in the Institute, as a day boarder and/or hostler.
32. I, hereby indemnify the VJES management from and against all the responsibilities for the medical fitness of my son/daughter, at all times and further affirm that he/she has no communicable and serious diseases like that of fits, any sort of attacks or likewise or any kind of psychiatric problems like mental trauma or depression or any other sort of problem.
33. I, hereby indemnify the VJES management from and against all the responsibilities, ties, liabilities and legal implications of any law of the land for the time being in force or otherwise, in any manner; in case of my son/daughter possessing, using or dealing with any kind of intoxicating material including alcohol, drugs of any kind, gutka, tobacco, cigarettes or any other sedative materials; and, in case of my son/daughter, possessing, using or dealing or abetting the use of any kind of weapons including sticks, rods, explosives, firework or any such material.
34. I, hereby indemnify the VJES management from and against all the criminal proceedings and/or any legal case or dispute against my son/daughter. I understand and agree that in case of any legal implications or proceedings against him/her today and in future, he/she himself/herself and/or I, myself, shall assume all the responsibilities, liabilities and legal implications of any law of the land for the time being in force or otherwise; and the Institute shall not be liable for that, in any manner.
35. I am giving this Indemnity Bond to the VJES management with full understanding that the Institute will at all times, in no way, liable for any action. right or claim or compensation or any legal implication in any forum, organization or any kind of court on any account, at request by myself, my son/daughter, my dependents, next of kin or other legal representatives; and legal disputes, if any, will be subject to the jurisdiction of the courts in Mohali District only.

UNDERTAKING /ACKNOWLEDGEMENT BY THE PARENT / GUARDIAN

1. My Son/daughter/ward has submitted this application form for regular program with full understanding with my express permission; and I shall hold myself responsible for his/her good conduct and behavior as a student of the institute and adherence to the provisions.
2. I shall hold myself responsible for payment of all his/her stay in the institute and pending dues, penalty etc.
3. I shall myself be responsible for any sort of liability arising and any civil or criminal case lying against my son/daughter/ward during the course of study in the institute.
4. I endorse the undertaking given by my son /daughter (ward).
5. I will accept all communications sent by the VJES to me by any media.

(Signature of the student)

(Signature of the Parent/Guardian)
(compulsory in case of candidate being minor)

Date: / /

MEDICAL DECLARATION



Full Name of Student _____ Date of Birth: _____ Gender: M / F

Height _____ Weight _____ Are you over weight: Yes / No

Blood Group _____

Eye Sight _____ (If wear specs, specify) Left _____ Right _____

Do you drink alcohol: Yes No

Do you use contact lens? Yes No

Do you smoke: Yes No

Have you ever been on drugs: Yes No

Have you ever had or do you suffer from?

Epilepsy: Yes No Chicken Pox: Yes No Tuberculosis: Yes No

Measles: Yes No Diabetes: Yes No Mental illness: Yes No

Are you allergic to any medicine or product (Specify)? _____

Any medication, being taken on a regular basis? _____

Any Permanent marks on your body/skin? _____

Have you got any surgical treatment (Specify)? _____

Any accident with long-term consequences.? _____

Have you any other physical Handicap/ disorder? _____

I state that my Physical and mental condition is Excellent and I do not carry any infectious disease, I have never been on any kind of Drugs or regular medication. Therefore, I comply with the requirements of Health standards required to train myself in the company without any risk.

(Signature of the Parent/Guardian)

(Signature of the student)

(compulsory in case of candidate being minor)

Date:

I, Dr _____ Registration No.: _____ do hereby certify that the above-mentioned candidate/person is not suffering from any of the diseases mentioned below, nor from any other disease which may be contagious, Infectious or harmful to others.

1) Infectious Skin diseases. 2) Tuberculosis. 3) Epilepsy or any other type of convulsions. 4) Venereal Diseases. 5) Trachoma. 6)

Any other physical or mental disability that may hinder his/her education. I also certify that the candidate has been vaccinated for tetanus, by me.

Any Other Observation / Remarks: _____

Signature of the Medical Practitioner

Stamp with Address

Date: _____

