



**DIRECTORATE OF LIFELONG LEARNING (DLL)
UNIVERSITY OF KASHMIR, SRINAGAR**

NAAC ACCREDITED GRADE "A+"

Naseem Bagh Campus, Hazratbal Srinagar-190006

APPLICATION FORM FOR ADMISSION TO DIABETES EDUCATOR PROGRAMME

Affix Recent
Passport Size
Photograph

DO NOT STAPLE

(To be filled by candidate in BLOCK LETTERS)

COURSE APPLIED FOR:

Details of Application Fee _____

1. Name (Capital Letters)

2. Parentage (Capital Letters)

3. Contact Details:

a) Permanent Address:

b) Present Address

Cell No:

Landline:

Aadhaar No:

E-mail:

4. Educational Qualification: (Attach self-attested photocopies of certificates)

Examination passed	University /Board/School	Year	Subject	Max. Marks	Marks obtained	%age

5. Experience (if any) _____

6. Date of Birth

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7. Gender:(Male/Female/Transgender) Tick any

8. a)Religion:_____ b)Category (if any)_____

9. Employed /Unemployed (Yes/No):_____

DECLARATION:

I declare that the entries made in this application form are true and correct to the best of my knowledge and nothing has been concealed or suppressed or misrepresented

Signature of Candidate

List of enclosures with the application form:

1. _____ 2. _____ 3. _____
 4. _____ 5. _____ 6. _____
 7. _____ 8. _____ 9. _____

Note:

1. Application form must accompany self-attested Xerox copies of all required certificates & 4 PP size photographs;
2. Incomplete application forms will be rejected without any further notice.



Application Receipt

Name _____

Parentage _____

Address _____

Sign of official

Course applied _____