

ಸೈಂಟ್ ಜೋಸೆಫ್ಸ್ ವಿಶ್ವವಿದ್ಯಾಲಯ

ST JOSEPH'S UNIVERSITY

READMISSION FORM FOR ONE SUBJECT: EVEN SEMESTER OF 2024-25

1	Name of the student	
2	Registration number	
3	Phone number of the student	
4	Code number and the Title of the	
	paper for which the readmission was	
	sought	
5	Email ID of the student (you will be	
	intimated about the interview to this	
	Email ID)	
6	II Language	
	The last semester exam written by the	
7	student. (Eg: I/III). (Please attach the	
	photo copy of the marks card/hall ticket)	
	Was your hall ticket been denied	Yes / No
8	for one subject for shortage of	
	attendance?	
	The Semester Examination in which hall	
9	ticket was denied for one subject.	
	During your course, was your hall ticket	
10	blocked more than once?	
12	If yes, give details	

Contd.

Declaration

I declare that the above information submitted by me is correct. I also declare that I have read the eligibility criteria for readmission to the even semester of 2024-25. I understand that I will have to forfeit the admission and fees paid thereof, if I am found to be ineligible or have provided incorrect information in this application. I also understand that the attendance is calculated from the reopening day of the semester.

Signature	a £ 41a a		:41-	4.4.
Signature	or the	parent	with	aate

Signature of the student with date

For office use only						
The student	with the registration					
number	is permitted/ not permitted to attend classes					
in	He / She					
must pay the fee for	attending classes for one subject. REGISTRAR					
For accounts sect	on:					
Fee details:						
Signature of the A	ccountant:					

Incomplete forms will be rejected