



SRI KRISHNADEVARAYA UNIVERSITY :: ANANTAPURAMU
DIRECTORATE OF DISTANCE EDUCATION
B.Ed. (ODLS) SUPPLEMENTARY EXAMINATIONS, DECEMBER - 2019
APPLICATION FOR REGISTRATION

Application No:

Enrollment No.

1. Name of the Candidate: _____

2. Name of the Father: _____

3. Gender: _____ 4. Medium: _____ (Telugu / English)

5. Permanent Address:

Pin Code: _____

Affix a recent
Passport size
Photograph duly
attested by a
Coordinator

Mobile No. _____

6. College Code: _____ Name of the Centre: _____

7. Methodology: 1 _____ 2 _____

8. Paper Code for which the student is appearing for Supplementary Examinations.
(Enclose photo copy of the last appearance marks list)

Paper Code	Title of the Paper

9. Particular of Examination Fee Paid:

DD / Challan No.	Date	Amount	Bank	Place

DECLARATION OF THE CANDIDATE

I hereby declare that particulars furnished in this application are true complete and correct to the best of my knowledge and belief and I understand that in the event of any information being found false or incorrect at a later date my candidature for the examination is liable to be cancelled.

Date :

Place :

Signature of the Candidate

Principals are directed to forward Examination Applications of the candidates who maintained above 75% attendance in PCP Classes & 100% Attendance in Practical Classes throughout the Course.

Signature of the Principal with College Stamp