Application No:	/2019-20
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KARNATAKA STATE LAW UNIVERSITY Accredited with 'A' Grade by NAAC

Navanagar, HUBBALLI - 580 025.

Phone: 0836-2222392, 2222472, Fax: 2223392
(SZ) Email: caseworker.acad.kslu@gmail.com

Website www kshi ac in

8th Semester

Web	site. www.ksiti.ac.iii		(NZ) Emai	l: kaksluacac	lemic9@g	mail.com
-	3.0	:ACADEMIC S	ECTION:			
	Admission appl	ication foryear	of		2019	-2020
		y the College to the K.S.L.U.				
						
. Nan	ne of the College:	10				PHOTOGRAPH Affi your latest Passpor
. Colleg	ge Code :					size Photograph (4 cm x 5 cm)
Progr	amme Code :	4. Admission / Registration Nu	ımber :			Self attested
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	of the Candidate (Leave on	e box empty between First name,	Middle name	Surname) as in	Qualifying	
. Fathe	r Name :	7. Mot	her Name :			
3. Date	of Birth ://	9. Gender :(N	/ale/Female/TO	G) 10. Nationa	ılity :	
		12. Category :				
	gion:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	.s. Delongs to	Minority (1 cs/1	(0)	
4. Mar	ital Status: Married	Unmarried				
5. Whe	ther claims reservation und	er 371(J) (Yes/No):,	(If yes, Enclo	se the certificate	e) -	2
16. Whe	ther Employed (Yes/No) : _	, (If yes, Enclose the N	OC from empl	oyer)		
17. A) A	cademic Details : (Only for	Fresh Admission to LL.B)				
Sl	Qualification	College/Board/University	Year of	Total Marks	Maximum	Percentage (%)
01	10 th / Matriculation		Passing	obtained	Marks	
02	II PUC/+2/Intermediate					
*03	Graduation					
-	First Year (I, II sem)			-		
-	Second Year (III,IV sem)					
-	Third Year (V, VI sem)			-		
	Fourth Year (VII, VIII)			-		
	-	0.03 of above table (B.A/BSC/B.Co		A/Others)		
B) Acad Sl	lemic Details: (Only for Su	bsequent year admissions to LL.		T		T
No	Qualification	College	Year of Passing	Total Marks obtained	Maximum Marks	Class / Grade
01	LL.B					
	1 st Semester	*				
	2 nd Semester					
	3 rd Semester				* .	
	4 th Semester					
	5 th Semester					2
	6 th Semester					
	7th Competer					

City		District -	
State			
			PIN Code
Telephone No with Country & STD Co	ode	Mobile Number (if any)	
Email id (if any)			
0) 5			
0) Permanent Address (Do Not give	Post Box No. Leave a blank b	etween each until of addres	s like House No. Street Name.
ity		District	
ate			
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elephone No with Country & STD Cod	e	Mobile Number (if any)	
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	DECLABATIONS		
I hereby declare that I have	DECLARATION B		the programme for which I se
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	sity and shall not raise any	dispute in future over the s	same regulations.
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ave received back all original M mission		ertificate which were sub	Signature mitted at the time of nature of Applicant
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ave received back all original M mission Ite	arks Cards and Degree Ce For College Offic	Sign see use only	mitted at the time of
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