

## RE-REGISTRATION FORM



### KARNATAKA STATE OPEN UNIVERSITY, MYSORE JULY- DEC. (2015) FIRST CYCLE (SEMESTER MODE)

NOTE: 1. NO FIELDS SHOULD BE LEFT BLANK. ALL FIELDS ARE COMPULSORY.  
2. ALL ENTRIES SHOULD BE MADE IN BLOCK LETTERS ONLY.  
3. CANDIDATE SHOULD FILL THIS FORM IN HIS/HER OWN HANDWRITING.

PASTE YOUR  
PASSPORT SIZE  
PHOTOGRAPH  
HERE

1) Name of the Program.....Semester.....  
Specialization.....

2) Candidate Roll No.....  
(Given by KSOU at the time of Registration)

3) Study Centre Code KSOU / AUT / 733

4) Name of the Study Centre SWASTIKA INSTITUTE OF HIGHER EDUCATION & TECHNOLOGY

5) Name of the Candidate.....

6) Father's Name.....

7) Address for Correspondence:

.....  
.....  
.....City.....State.....  
.....PIN.....Phone...(0).....

8) Subjects/Papers in which Candidate Appearing.

Sr. No.	Subject Code	Subject/Paper code

9) Demand Draft Details:

DD No.....Dated.....Bank.....

Amount.....

Date:...../...../.....

Signature of the Candidate

Verified By

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STUDY CENTRE SEAL & SIGNATURE

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AUT

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KSOU