



APPLICANT  
PHOTO  
WITH  
SIGNATURE

**APPROVAL FORM**

**SHINE UNIVERSITY** admits students and makes available to them its advantages, privileges and courses of study without regard to Tribal’s, SC/ST, Poor, Backward Classes, Armed Forces Personnel, War Widow Children, Physically Handicapped, religion, national origin or disability, dropped out, Non-formal and Slum Children in each stream for admission. 10% discount on fee is also permissible to them subject to verification of relevant documentary proof.

Shine University has a published admission policy that is made available to all applicants and parent(s)/guardian(s)/Centers as part of the admission process. The Admission policy under the Industry Integrated admission criteria, as well as a description of the entire admission and Examination process.

In addition to this application form, the applicant’s current guidance centre/counselor will submit transcripts of the criteria that will be used for admission that includes the applicant’s working experience, grades, Industry record and discipline/conduct record.

APPLICANT SECTION					
<b>Applicant Name:</b>					
<b>D.O.B :</b>	<b>Father’s Name :</b>		<b>Mother’s Name :</b>		
<b>COURSE:</b>	<b>SPL:</b>		<b>INDUSTRY EXPERINCE :</b>		
<b>Home Address:</b> Street and Pin Code:					
City/Town:		State:		Zip Code:	
Home Phone					
<b>Qualification</b>	SSLC Completion Year :		Diploma Completion Year :		
	HSC Completion Year :		Degree Completion Year :		
NOTE : Attach Educational Certificates Attested copy with signature of Admission Co-coordinator and enclose Bio-Data.					
REMARKS:					
Applicant Signature with Name					

**PARENT/GUARDIAN SECTION**

<b>Parent:</b>	<b>Father's Name:</b>	<b>Mother's Name</b>	<b>Father's Occupation:</b>
<b>Home Address:</b> Street and Number:			
City/Town:		State:	Zip Code:
Home Phone #:		Work Phone #:	
Email:		Parent's Signature:	

**ADMISSION CENTRE/COORDINATOR SECTION**

Above all transcripts of grades and discipline/conduct as required by the Shine University Admission Policy. In addition, that with my recommendation, I declare above all documents / Educational qualifications are true and I checked & verified for Admission.

I declare that I am solely responsible for my own and that if any, I am responsible and I will not pursue any action for said personalities and Institution take any action against me.

Name of Guidance Counselor: \_\_\_\_\_

Centre Name : \_\_\_\_\_ Code : \_\_\_\_\_

Place : \_\_\_\_\_

I will submit the required information by the due date. Yes  No  If no, please explain.

Signature of Centre/Admission Coordinator  
With seal

**UNIVERSITY SECTION**

Enrollment No. \_\_\_\_\_.

This is to certify that Mr/Ms \_\_\_\_\_ with Admission Enrolment No. \_\_\_\_\_ is a student of \_\_\_\_\_ in Department of \_\_\_\_\_ for the academic year \_\_\_\_\_. He/She is bonafide student of our Institution and allotted Register No. \_\_\_\_\_.

Date: \_\_ / \_\_ / \_\_

Admission Officer