



स्वामी सत्यानन्द विद्यापीठ

SWAMI SATYANAND VIDHYAPEETH

ANNEXURE - 7

प्रवास प्रमाण-पत्र हेतु आवेदन-पत्र APPLICATION FORM FOR MIGRATION

Form No.

Roll No.

Enrolment No.

Centre Name with Address :

(To be filled by the student)

1. Name of Student in Capital Letters

2. Father's Name

3. Mother's Name

Space for
passport size
photograph
duly self attested,

Signature of Candidate

4. Date of Birth

5. Sex

M/F/O

6. Nationality

7. Religion

8. Postal Address

Pin Code

9. Phone No.

Mobile No.

10. E-mail

11. Details of Examination Passed from vidhyapeeth

Examination Passed	Year of Passing	Roll Number	Enrollment No.	Marks Obtained

12. DETAILS OF FEES PAID:

Demand Draft No.:

Date:

Amount:

- Note :** (i) demand draft should be drawn in favour of **Swami Satyanand Vidhyapeeth** & payable at Kashipur
(U.S.Nagar) Uttarakhand - 244713
(ii) Form should be filled in with blue / black ball pen only.
(iii) Attach a copy of certificate - cum- mark sheet.

Declaration

I _____ Son/Daughter of _____ do hereby
declare that the particulars furnished above are true & correct to the best of my knowledge and belief. I will fully
responsible for any false and misleading information found at any stage. I also declare that I shall abide by the rules
and regulation and terms & conditions issued by **Swami Satyanand Vidhyapeeth** form time to time.

Signature of the Parents/Guardian

Signature of the Student

Place :

Date :

: