Application Fee: US \$ 50

Other fees: (see fee structure available in the website)



Form No: IS22

Office of the Director, International Relations Cell (IRC) JAWAHARLAL NEHRU ARCHITECTURE & FINE ARTS UNIVERSITY

Masab Tank, Hyderabad - 500 028, Telangana (India)

Application Form for Registration for International Students

Passport size Photo

Sir,

I hereby apply for re	gistration as an i	international	student a	and request	you k	indly to	register	my
name in your University. My	particulars are su	bmitted as fo	llows:					

1.	Name in full (in capital letters)	:
2.	Local Address	:
	(With telephone number, if any)	
	Home (with telephone number, if any)	
3.	Nationality/Country of Origin	:
4.	Sex	: Male / Female
5.	Date of Birth-Day/Month/Year	DDMMYYYY
6.	Name of the Degree/ Program applie	d for:
7.	Name of the College / Unit	:
8.	Passport Number	:
9.	Student / Research Visa Number	:
10.	Duration of Visa	:
11.	Residential Permit Number	:
12.	Address of Visa Issuing Authority	:
13.	Person to be contacted in Emergency	7:
	a. Relationship:	
	b. Telephone :	
	c Address ·	

Declaration and Undertaking

I hereby declare that I have carefully read the application form for registration and have read instructions/ requirements thereof. I have also read the rules for eligibility and conduct and discipline laid down by the University and I agree to abide them. I understand and declare that I shall be responsible for any discrepancies, errors, wrong or incorrect information supplied by me in this application form and for Cancellation of admission thereof or otherwise found in eligible.

I undertake to pay the prescribed by Jawaharlal Nehru Architecture & Fine Arts University for the entire duration of my course/program.

I undertake to furnish the necessary certificates/documents in original along with a true copy of each of them as and when asked for, failing which I understand that my eligibility and admission stands automatically cancelled and that the University is not responsible for the same.

I here by declare that the information given in this form is true and correct to the best of my knowledge and belief.

Place: Date:	Signature of the Student							
Note: Incomplete application will not be accepted.								
For Office Use Only								
The Applicant is admitted to	(College)							
inprogram during t	he academic year 20 —20 .							
Date:	Signature of the Director							
(Office Seal)	International Relations Cell							