



CENTRE FOR DISTANCE AND ONLINE EDUCATION

ALIGARH MUSLIM UNIVERSITY, ALIGARH

STUDENT'S INFORMATION FORM

Session: 2020-2021

Name of Student: - _____

Course: - _____ **Year/Semester: -** _____

Admission No: - _____ **Enrolment No: -** _____

Date of Birth (DOB):- _____

Father Name:- _____

Address: - _____

Aadhar No: - _____

Mobile No: - _____

Email Id:- _____

Religion:- _____ **Category: -** _____

Economically Weaker Section (EWS):- YES/NO

Person with Disability (PWD):- YES/NO

NECESSARY INSTRUCTIONS

- 1. All Fields of the Form is compulsory to be filled.**
- 2. Incomplete Form is not accepted.**
- 3. The information of the students provided through this Form will be used for the official communication and for examination purpose.**
- 4. Student will provide his/her own working Mobile Number and Email Id for registration.**
- 5. Filled in Form is to be submitted in the CDOE Office, AMU, Aligarh or can be sent to the Email-Id: cdedirectors@gmail.com**
- 6. Last date for submission of Form is 31st December 2020.**