

Dr. Ram Manohar Lohiya National Law University

Sector D-1, LDA, Kanpur Road Scheme,

Lucknow-226012

Enrolment/Admission Form PG Diploma in Cyber Law Programm - (2019-20)

The Admission Form, duly filled in, shall be submitted to the office of Dr. Ram Manohar Lohiya National Law University, Lucknow within the last date notified. Irregular or incomplete form will not be entertained. Any Misrepresentation or fraudulent information shall lead to the cancellation of the admission of the candidate at any stage.

| | (To be filled in by the office) | | |] |
|---|---|---------------|----------------|---|
| Date | of Admission | | Affix Passport | |
| Cou | rse | | size recent | |
| Enro | llment No | | photograph | |
| | | | | |
| | | | | |
| | (To be filled in by the applicant in | his/her own h | andwriting) | |
| 1. | Name of the applicant in Block Letters | | | |
| | (as appears in the High School Certificate) | | | |
| 2. | a) Father's name and occupation | | | |
| | b) Mother's name and occupation | | | |
| 3. | Guardian's name, occupation and | | | |
| | relationship with the applicant | | | |
| 4. | | House No | | |
| | | Sector/Ward/V | illage | |
| | | P.O | District | |
| a) Father's/Mother's/Guardian's present address | | StatePIN | | |
| | | Tel.No | | |
| | | E-mail ID: | | |
| | | | | |
| | | House No | | |
| b) Parent's permanent home address | | Sector/Ward/V | illage | |
| | | P.O | District | |
| | | | PIN | |
| | | Tel. No | | |
| | | E-mail ID: | | |
| | | I = | | |

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| c) Address for Correspondence | | House No | | | |
|-------------------------------|--|----------------------------------|--|--|--|
| | | Sector/Ward/Village | | | |
| | | P.ODistrict | | | |
| | | State PIN | | | |
| | | Tel.No | | | |
| | | E-mail ID: | | | |
| 5. | Nationality | 10 | | | |
| ٥. | Nationality | | | | |
| 6. | Gender: Male/Female /Transgender | | | | |
| 7. | Whether lives in Urban/Rural area? | | | | |
| 8. | Whether a domicile of Uttar Pradesh? | | | | |
| | Yes or No | | | | |
| 9. | Whether belongs to S.C./S.T./O.B.C./ P.H. | | | | |
| | Category of U.P.? If yes, specify | | | | |
| 10. | Whether belongs to Physically Handicapped | | | | |
| | category? If yes, specify: Orthopaedic/ Visual/Hearing impairment | | | | |
| 11. 1 | Name, address, telephone no. and E-mail ID of | House No | | | |
| | the Local Guardian, if any | G /W. 10711 | | | |
| | | Sector/Ward/Village P.O District | | | |
| | | State PIN | | | |
| | | | | | |
| | | Tel.No | | | |
| | | E-mail: | | | |
| | | | | | |
| 12. | a) Date of Birth(as per High School Certificate) | | | | |
| | b) Place of Birth | | | | |
| | c) Age of the applicant (as on 1 st July, 2019) | | | | |
| 13. | Blood Group of the applicant | | | | |
| 14. | Marital Status: Married/ Unmarried | | | | |

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15. Examination Passed(High School or equivalent Examination onwards)

| Sl. | Name of Examination | Year of | Name of the Board/ | Subjects offered | Division/ | % of |
|-----|---------------------|---------|--------------------|------------------|-----------|-------|
| No. | | Passing | University | | Position | Marks |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| _ | | | | | | |

| 16. | Whether the applicant is pursuing any other | |
|-------|--|--|
| | course of study or in service? If yes, give details | |
| | of the course and the Institution/Department | |
| 17. | Whether the applicant participated in Co- | |
| | curricular activities and sports. If yes, give | |
| | Details | |
| 18. | Approximate annual income of the family | |
| | from all sources. | |
| 19. | Whether the applicant had been rusticated by | |
| | any Educational Institution or any Penalty is | |
| | imposed for violation of the law of the land. | |
| 20. | Any other remark, if any | |
| | (Full name) I | hereby declare that the statements made |
| by n | ne as above are correct. I shall abide by all the Rule | |
| time | to time. I understand that in case any information | furnished by me is found to be incorrect, my |
| adm | ission to the course shall be liable to be cancelled. | |
| | | |
| Date | | e of the Applicant |
| | | |
| Place | | |

For Office Use Only

N.B.:- Duly attested photocopies of all the original documents and certificates are to be attached herewith.

Provisional Admission granted

(Programme Director)
PG Diploma in Cyber Law Programme



Dr. Ram Manohar Lohiya National Law University, Lucknow <u>Undertaking by the Candidates</u>

| I, |
|--|
| candidate for admission to |
| is aware of the fact that RAGGING in any form, within or outside the educational institution is a criminal offence and prohibited under law and as per rules any student found indulging in ragging |
| shall be expelled from the University and a FIR will be lodged against him for necessary action. |
| I have read all the terms & conditions of the provisional admission and agree to abide these terms & conditions in my academic interest. I have received a copy of hostel rules and Library rules and have gone through it and undertake to abide by it. I am aware that keeping vehicle in University premises is not allowed and carrying and displaying of ID card while in campus is necessary in the interest of my security. I hereby undertake that I shall neither indulge myself nor instigate any other student in ragging or create nuisance in the hostel and University premises and shall not vitiate the academic atmosphere of the University in any manner. |
| In case I am found indulging myself in any act amounting to violation of discipline or misconduct or in the acts falling under the definitions of Ragging, or breach of above undertaking, action be taken against me as per rules. |
| Date: Signature of the Candidate |

Ragging includes display of noisy, disorderly conduct, teasing, rough or rude treatment indulging in rowdy, undisciplined and obscene activities which cause or are likely to cause annoyance; undue hardship, physical or psychological harm or mental trauma or raise apprehension or fear in a fresher or other students, or forcing a student to do any act which such a student is not willing to do or which causes him/her shame or embarrassment or danger to his/her life or limb, or indulging in eve teasing.

^{*}Ragging within or outside the educational institution is prohibited.



Name of Students:

Dr. Ram Manohar Lohiya National Law University Sector D-1 ,LDA ,Kanpur road Scheme, Lucknow-226012

Affix your

Recent passport size

PGDCL Programme-2019-20

Form for the Proctorial Board

| Course & Semester : | | | | | photographs | |
|---------------------|-------------------|------------------|--------------|------------------|-------------|--|
| Blood | Group: | | | | | |
| S.No. | | Name and Address | Mobile No. | Land Line No. | E-mail ID | |
| Sir (o. | | Name: | 111001101101 | Barra Erro 1 vo. | E man ib | |
| 1. | Student | Address: | | | | |
| | | Name: | | | | |
| 2. | Father | Address: | | | | |
| | Mother | Name: | | | | |
| 3. | | Address: | | | | |
| | Local Guardian | Name: | | | | |
| 4. | | Address: | | | | |

Date: / / 2019 Signature of the Student



डा० राम मनोहर लोहिया राष्ट्रीय विधि विश्वविद्यालय, लखनऊ

Dr. Ram Manohar Lohiya National Law University, Lucknow

Dr. Madhu Limaye Library, Lucknow LIBRARY MEMBERSHIP FORM

Fix your Ticket size photograph

(USE CAPITAL LETTERS ONLY)

| Candidate's Name: Fin | rst Name: | Middle Name: _ | Last Name: |
|--|----------------------|-------------------------|--|
| Father's Name: | | | |
| Enroll. No | (To l | be filled by the Office |) |
| D.O.B | | Blo | ood Group |
| Member Type: - | Designation (if empl | | |
| Permanent Address : | | | |
| _ | | | Pin Code: |
| | | | (Residence): |
| | | | I hereby agree to abide all of them. |
| (Note: Send soft copy of y your e.mail, please mention | | | e format separately to rmlnlu.library05@gmail.com . In (Signature of the User) |
| Recommendations of | Head of the Depart | ment/Admission In- | charge: |
| I recommend the abov | e named person to a | vail the library facili | ties/ID Card. |
| Valid from: | Т | Till: | |
| Signature with seal: | | | Date : |
| For Office use only Library ID Given: | | | |
| Library ID created | by (Name & Sign): | | Date: |

(Librarian Incharge)



Dr. Ram Manohar Lohiya National Law University

Sector D-1, LDA, Kanpur Road Scheme,

Lucknow-226012

| Student's | Copy |
|-----------|------|
|-----------|------|

Seal of the Office.....

| Date: | • |
|---|---|
|), | |
| ne Programme Director, G Diploma in Cyber Law Programme, r.Ram Manohar Lohiya National Law University, ucknow-226012 | |
| abject: Undertaking for documents | |
| r, ue to some unavoidable reasons, I am not able to submit the llowing document(s):- | |
| | |
| | |
| | |
| | |
| | |
| undertake to submit the same within 10 days from the date of ovisional admission. | f |

Yours sincerely