Serial	l No				

### GURU ANGAD DEV VETERINARY AND ANIMAL SCIENCES UNIVERSITY LUDHIANA – 141004

### ADMISSION FORM FOR COUNSELLING FOR ADMISSION TO DIPLOMA IN VETERINARY SCIENCE AND ANIMAL HEALTH TECHNOLOGY (ACADEMIC SESSION 2017-18)

**Important:** The candidate must carefully read instructions given at the end of this form and in the prospectus before filling the form.

For Office use only

Last Exan Passed	Name of Board / University	Marks/OCPA/OGPA obtained	% age of marks	photograph pasted with gum duly signed by the candidate.
Checked by	·	Re-checked by		ng
				.Admission Status
	To be filled	by the candidate in his/h	er own handwritin	ng with blue/black ink
1. Nai	me of the applicar	nt (in block letters)		
2. Fat	ner's name (in blo	ock letters)		
3. Mo	ther's name (in bl	ock letters)		
4. (a)	Permanent Addre	ss:		
(b)	Correspondence A	Address:		
(c)	Telephone No. wi	ith code No.		
			Mobile N	Jo
			E-mail .	
(d)	Aadhaar Card No			
(e) 1	Roll No. of Entra	nce Test		

٥.	Place of residence (attach certificate as pe	er Annexure VIII/IX)				
6. Reserved category (ies) under which adm (SC/ST/BC/SP/FF/AF/TA//DP/KJR) Brit		ng the original as			••••••	
	well as the attested copy (ies) of the certi-	* *				
	in Annexure I to VI at the time of counsel	•				
	support of your claim, otherwise, it will n	not be considered for				
_	admission.					
7.	Date of Birth			• • • • • • • • • • • • • • • • • • • •	•••••	
	(As entered in the matriculation or equiva	alent certificate).				
	Attach attested copy					
8.	Nationality				• • • • • • • • • • • • • • • • • • • •	
9.	(a) Name of father or guardian with relati	on				
	(b) Occupation of father/guardian					
	(c) Annual income of the father/guardian					
	(d) Address of father/guardian					
					•••••	
					•••••	
10.	Have you ever been dropped/expelled/rus				• • • • • • • • • • • • • • • • • • • •	
	admission to any school or college? If yes	_				
	reasons and period of dropping/expulsion					
11.	Have you ever been found guilty of adopt	-				
	in any examination or disqualified/ barred	d from appearing				
	in any examination conducted by any Boa	ard/University?				
	If yes, give details.					
12.	Detail of examination (s) passed:					
Exa	mination	Matriculation			10+2	
Nan	e of School					
Nam	e of the Board					
Mon	th and Year of passing					
Boar	d Roll No.					
Max	imum Marks					
Mar	ks Obtained					
	entage of Marks					
	ium of Instruction					
				Subject	Total	Marks
				-	Marks	obtained
				Biology		
	Subjects			Physics		
	ļ			C1		
	}			Chemistry		
				D 1' 1		
				English		1

### **DECLARATION BY CANDIDATE**

1.	Ison/daughter of Shcertify that the application form has been filled in my own hand according to the given instructions.						
2.							
3.	If the information provided by me is found to be incorrect, I will and summarily expelled from GADVASU.	l be liable to be prosecuted under law					
	e						
Date	2	(Signature of candidate)					
	DECLARATION BY PARENT/ G	GUARDIAN					
appl shal and		is/her being admitted to the college, I npt payment of college and other fees ne expenses resulting from delay and					
Plac	e						
Date	<b>9</b>	(Signature of Parent/Guardian)					
		Name					

#### INSTRUCTIONS

- 1. The Candidate must ensure his/her eligibility (from the prospectus) before filling up the form.
- 2. The application form must be filled LEGIBLY IN BLUE/BLACK BALL POINT IN CANDIDATE'S OWN HANDWRITING and submitted in person at the time of counselling.
- 3. Latest passport size photograph from the same negative duly signed by the candidate should be pasted in the space provided on the application form. These photographs should be the same in all respects as the candidate wishes to appear in the counselling, if he/she wishes to appear with beard, turban, etc, photograph should appear so.
- 4. The application form must be completed and no column should be left blank. Write "not applicable" where no information is required to be given. Incomplete application form is liable to be rejected.
- 5. Self attested copies of all the certificates from matriculation onward and other supporting testimonials must be attached with white application form in the first instance. No addition certificate/testimonial shall be entertained subsequently.
- 6. The Registrar may, at his discretion, cancel the admission of a candidate if at any time, it is found that the candidate obtained admission by misrepresentation/concealment of facts or the admission was made due to error oversight, etc.

### List of Self Attested copies of Certificates/Testimonials to be Attached with the application form

- 1. Certificate as evidence of belonging to reserve category(ies) (Annexure -I to VI).
- 2. Certificate as evidence of an outstanding sportsperson.
- 3. Declaration of Parents/Guardian (Annexure -VII).
- 4. Certificate of residence (Annexure VIII/IX).
- 5. Certificate as evidence of date of birth.
- 6. Detailed marks certificate of all the parts of the examination (s) which qualifies the candidate for admission.
- 7. Character certificate from the Principal of School/College last attended.
- 8. Low income certificate from competent authority in the prescribed format (Annexure –X) for SC candidates whose parent's annual income from all sources is less than rupees 2.5 Lac.
- 9. Self undertaking of gap in study, if applicable (Annexure -XI).

#### Note:

- (i) Original Certificates/Testimonials etc. of self attested copies of which have been enclosed with the Admission Form should be produced at the time of counselling.
- (ii) If electronically generated detailed marks certification/copy of gazette of 10+2 is produced at the counseling, it should be attested by the Principal of the school last attended.

### **ANNEXURE I**

### CERTIFICATE FOR SCHEDULE CASTES/SCHEDULED TRIBES (SC/ST)

Dispatch No		Date:
1.	It is certified that Shri/Smt./Kumari_	
	son/daughter of Shri	
	of village/ town	
		State of Punjab
	belongs to	Caste which has been recognized as
	Scheduled Caste as per "The Constitut	ion (Scheduled Castes) Order, 1950"
2.	Shri/Smt./Kumari	and his/ her family lives in
	village/town	District/Division of Punjab State.
	Place	Signature
	Date	Designation
		(Seal of office)

### Authority competent to issue SC/ST Certificate:

- District Magistrate / Additional Distt. Magistrate / Deputy Commissioner / Additional Deputy
   Commissioner / First Class Stipendiary Magistrate / Sub Divisional Magistrate / Executive
   Magistrate.
- ii) Revenue Officer not below the rank of Tehsildar.
  - N.B.: In case the certificate is found to be false or incorrect, the candidate will render himself/herself liable for criminal prosecution.

### ANNEXURE- II (a)

### CERTIFICATE IN SUPPORT OF CLAIM OF BELONGING TO BACKWARD CLASS (BC)

1. ′	This is certified that Mr./Ms			• • • • • •	sc	n/daugl	nter of	Shri
	village/	town					in Dis	strict/
	Division	of	State	of	Punjab,	belong	s to	the
		caste whic	h is rec	cogn	ized as a	Backw	ard Cla	ass in
	term of Punjab Government letter No.	••••						
2.	This is also verified that income of the family from all sources does not	exceed ₹	6,00,0	00/-	(Rupee	Six Lak	th only	y) per
	annum in terms of letter No. 1/41/93-RC-1/609 dated 24-10-2013 from	Departm	ent of V	Velfa	are, Gov	ernmen	t of Pu	ınjab,
	Chandigarh.							
3.	Shri/Smt./Kumari			. and	l/or his/l	her fami	ly ord	inary
	resides in village/town of Distr	rict/Divis	ion of t	he St	ate of Pu	ınjab.		
Place .	e			Sig	nature			
Date	· · · · · · · · · · · · · · · · · · ·			De	signatio	n		
				(w	ith seal	of office	e)	
Autho	norities competent to issue BC Certificate:							
	Deputy Commissioner, Additional Deputy Commissioner, Sub-Divisioner, Sub-Divis	sional Ma	agistrat	te, E	xecutiv	e Magis	strate	(PCS
(	Officer only), Tehsildar.							
N.B.:	.: i) In case the certificate is found to be false or incorrect, the candidate	te will ren	nder hir	nsel	f/ hersel	f liable i	for crir	ninal
	prosecution.							
	ii) The certificate must not be dated one year before the first day of cou	nselling f	or adm	issio	n. Acer	tificate i	ssued	more
	than one year before the counselling date shall not be valid.							

### ANNEXURE- II (b)

OFFICE OF THE TEHSILDAR	
Low Income (for Applicants of	
No	Date
It is certified that according to the regional	establishment, the annual income of the whole family
of Sh. / Smt. / Kumari	S/O. / D/O. / Wife/O., resident of
VillagePost office	Tehsil
District(Punjab), is Rupe	ees

**TEHSILDAR** 

### **ANNEXURE-III**

## CERTIFICATE TO BE FURNISHED BY THE CHILDREN/ GRAND CHILDREN FREEDOM FIGHTER (FF)

Certified that Shri/Smt./Kumari	an
applicant for admission to Diploma in Veterinary Science and Animal He	ealth Technology programme at Guru Angad Dev
Veterinary and Animal Sciences University, Ludhiana is a son/daughter/son	n's son /daughter's daughter (delete whichever is not
applicable) of Shri who is fre	edom fighter/Tamra Patra holder and/or drawing
pension form treasury as per Punjab Govt. Rules/Inst	tructions wide letter no.
dated	
Place	Signature
Date	Designation
	(with seal of office)
Authority competent to issue F/F Certificate:	
Deputy Commissioner / Additional Deputy Commissioner / G.A. t	to Deputy Commissioner of the district to which the
freedom fighter belongs.	
N.B.: In case the certificate is found to be false or incorrect, the candid	date will render himself/ herself liable for criminal
prosecution.	

### ANNEXURE-IV (A)

# CERTIFICATE TO BE FURNISHED BY THE CANDIDATE IN SUPPORT OF CLAIM OF BEING CHILD OF IN-SERVICE OR EX-SERVICEMEN IN ARMED ORCES/C.R.P.F./ B.S.F. OFFICERS/ OFFICIALS (INCLUDING OFFICERS/OFFICIALS WHO DIED DURING THEIR SERVICES) (A/F)

	rtified that Mr./Ms.	
_	ter of Sh.	
	is Father/Mother/Guardian of Mr./Ms.	••
has been/is		
i)	Serving Defence Personnel/Ex-serviceman	
ii)	Killed in action	
iii)	Released / Retained vide Order No	
iv)	Died while in service and death attributed to Military Service.	
	This certificate is being issued for admission purpose only to Mr./Ms.	
to apply for a	admission to Diploma in Veterinary Science & Animal Health Technology at Veterinary Polytechnic, Kaljharani	
Place	Signature & Seal of the Commanding Officer/	
Date	Secretary Distt. Sainik Welfare Board	
	ANNEXURE - IV (B)	
POLICE/PU	IFICATE TO BE FURNISHED BY CHILDREN/WARD OF PUNJAB POLICE PERSONNEL, PUNJAB ARME UNJAB HOME GUARD WHO DIED DURING SERVIC OR DISABLED TO THE EXTENT OF 50% OR MOR	Е
GALLANT!	ON WINNERS OF PRESIDENTS POLICE MEDAL FOR GALLANTARY OR POLICE MEDAL FO TRY(AF)	IX.
	rtified that Mr./Ms	
_	terof Sh./Smt	
-	ndent of Mr./Ms	
Č	ter of Mr./Ms	
_	at	
	Police Medal for Gallantry is a ward of Punjab Police Personnel / Punjab Armed Police / Punjab Home Guard / Par rce Personnel .	a
Date	Signature of IG Police (HQ) Punjab	

In case the certificate is found to be false or incorrect, the candidate will render himself/ herself liable for criminal

N.B.:

prosecution.

### **ANNEXURE-V**

# CERTIFICATE TO BE ISSUED BY THE SUB-DIVISIONAL OFFICER (CIVIL) IN RESPECT OF INNOCENT CIVILIANS KILLED/100% PHYSICALLY INJURED BY TERRORIST/SECURITY FORCES ACTING IN AID OF CIVIL POWER (TA)

1. It	is certified that Shri/Smt./Kumari		son/daughter/wife of
Sh./Sn	nt	resident of	(Name
and a terrori mohal	area of town to which he/she sts/security forces acting in aid of ci	belonged to rural area) house numbelongs) was killed/100% physical vil power on Tehsil/Town	ally disabled by the in village/
Distric	ctHe was ner	ther terrorist nor having any links with	such elements.
2.	_	d for admission purpose only ply for admission to GADVASU, Lud	
Place_		Signature_	
Date _		Designatio (Seal)	n
Autho	ority competent to issue TA Certific	cate:	
	Deputy Commissioner / Additional of District	Deputy Commissioner / G.A. to Dep	outy Commissioner
N.B.:	In case the certificate is found to herself liable for criminal prosecut	be false or incorrect, the candidation.	e will render himself/

### **ANNEXURE-VI**

### CERTIFICATE TO BE PRODUCED IN SUPPORT OF CLAIM OF DISABILITY BY DISABLED PERSONS (DP)

No		Date	
It is certified that S	hri/Smt./Kumari	age about	years
son/daughter of			
District	has be	een examined by Dr	or a Medical
Board of Civil Hospital		_ consisting of Dr	
Dr	Dr	& Dr	·
The medical report is as under	:-		
• Name of the Diseas	se		
		progressive	
		tudies	
		s/her disability is	
<ul> <li>His/Her signatures</li> </ul>		, <u> </u>	
	C		
Photograph pasted with			
gum and then attested by			
the Civil Surgeon of the District.			
		(with seal of offi	ce)
	Signature of the (	Candidate	

### Authority competent to issue DP Certificate:

- 1. Civil Surgeon through a Medical Board consisting of at least 3 members out of which one shall be specialist in the particular field for assessing locomotor/cerebral/Visual/hearing disability as the case may be in case of multiple disability.
- 2. Single specialist doctor for single disability.
- **N.B.:** In case the certificate is found to be false or incorrect, the candidate will render himself/herself liable for criminal prosecution.

## ANNEXURE- VII SELF DECLARATION

### \* SELF DECLARATION OF THE PARENTS /GUARDIAN

Latest Passport Size Photograph of declarant

Ι	
	do, hereby, solemnly state and affirm as under :
1.	That I am a citizen of India.
2.	That neither the declarant nor the child/ward of the declarant has obtained the benefit of Residence in any other state.
Dated	DECLARANT
Verification	n:
Ver	ified that the contents of my above declaration are true and correct to the best of my knowledge and belief
and nothing	has been concealed thereof.
Dated	
	DECLARANT

## ANNEXURE-VIII RESIDENCE CERTIFICATE (SPECIMEN FORMAT)

\*\*CERTIFICATE TO BE ISSUED BY THE PRINCIPAL/HEAD MASTER OF THE GOVERNMENT/ RECOGNISED SCHOOL/COLLEGE CONCERNED IN CASE OF CATEGORY(i)

It is certified that Miss/M	⁄lr			
D/o/S/o Sh		has b	een a student of this Sc	hool/College for a
period of years.	, from	to	He/Si	he left the School/
College on				
Date			Signature of Princ	inal/Head Master
			of the School/Colle	
**CERTIFICATE TO BE IS	SUED BY HEA	D OF DEPARTMEN	T IN CASE OF CATE	EGORY (ii) (a)
Certified that Mr./Miss		S/o/W/o Sh	1	
Father/mother of Miss/Mr			(name o	of the Child/Ward)
is an employee of the			(name of office) of Pu	njab Government.
He/She is working as		and is posted at		
He/She has more than three years	service at his/he	r credit.		
Date			Head of Departme	nt
Place			(Seal)	
		OR		
Certified that Mr./Ms		S/o/W/o Sh		is
father/mother of Miss/Mr		is an employee of	the	of Punjab
Government. He/She is working a	as	on dept	utation with the	
and is posted at He/She has more than three years service a		at his/her credit.		
Place			Head of the Depart	ment
Date (Seal)		-		
**CERTIFICATE TO		Y THE RESPECTIVE		PARTMENT
	IIV THE CF	ASE OF CATEGORY	(11) (0)	
Certified that Mr./Ms		S/o/W/o	o Sh	is father/
mother of Miss/Mr_he/she is working as			_is an employee of the	Govt. of India and
he/she is working as		He/Sh	ne has been posted at Ch	nandigarh/Punjab
in connection with the affairs of P	unjab Governme	ent for the past three ye	ears.	
			Head of the Depart	ment
Date			(Seal)	

## \*\*CERTIFICATE TO BE ISSUED BY THE RESPECTIVE HEAD OF THE DEPARTMENT IN THE CASE OF CATEGORY (ii) (c)

Certified that Mr./Ms	S/o/W/o Sh	is father/mother of
Miss/Mr	is an employee of the	of (Institution/Undertaking) of
the Government of Punjab	and is working as	He /She has been posted at
	on with the affairs of Punjab Governme	
Date		Head of the Department (Seal)
		(Sem)
**CERTIFICATE TO	BE ISSUED BY THE RESPECTIVE	HEAD OF THE DEPARTMENT
	IN THE CASE OF CATEGORY	(ii) (d)
Certified that Mr./Ms	S/o/W/o Sh	is father/mother of
		(name of autonomous
		ernment has 20% or more share. He/She is
		It is also certified that
Date		Head of the Department (Seal)
Date		(Scal)
COMMISSIONER GE MUNICIPAL C	CATE TO BE ISSUED BY THE DC, A NERAL, DORG, DRO, EM, TEHSIL ORPORATIONS OF AMRITSAR, JA ND LUDHIANA IN CASE OF CATEO	DAR, COMMISSIONERS OF LANDHAR, PATIALA
Certified that Mr/Mrs.		
S/o/W/o Sh.		father/mother/guardian
of Mr./Miss	(name of the	ne Child/Ward with full address) has settled* in
Punjab or has resided* in Punjab for a	period of 5 years from	
to	He/She is working as	
*Strike out whichever is not applicable (name of profession, designation and j	ob). Signatur Commis Commis	e of DC, ADC (R), ADc (D), SDM, Asstt. sioner General, DORG, DRO, EM, Tehsildar, sioners of Municipal Corporations of Amritsar, or, Patiala and Ludhiana.

\*\*RESIDENCE CERTIFICATE TO BE ISSUED BY THE DC, ADC(R), ADC (D), SDM, ASSTT. COMMISSIONER GENERAL, DORG, DRO, TEHSILDAR BASED ON COPIES OF JAMABANDHI, REVENUE RECORD, MUNICIPAL RECORDS, REGISTERED DEED OR ANY OTHER DOCUMENT TO THE FULL SATISFACTION OF THE DC IN CASE OF CATEGORY (v).

Certified that Mr/Mrs.	
S/o/W/o Sh.	father/mother/guardian
of Mr./Miss	(name of the Child/Ward with full address) hold immovable property
at (place & district)	in the state of Punjab for the past
ye	ars.
Date	Signature of DC, ADC (R), ADC (D), SDM, Asstt. Commissioner General, DORG, -Tehsildar, based on copies of Jamabandhi, Revenue Record, Municipal Records, Registered deed or any other document to the full satisfaction of the DC.
COMMISSIONER GENERA MUNICIPAL CORPO	TO BE ISSUED BY THE DC, ADC(R), ADC (D), SDM, ASSTT. AL, DORG, DRO, EM, TEHSILDAR, COMMISSIONERS OF DRATIONS OF AMRITSAR, JALANDHAR, PATIALA JDHIANA IN CASE OF CATEGORY (vi).
Certified that Miss/Mr	S/o/D/o Sh
resident of	was born in Punjab as per Birth Certificate.
Date	Signature of DC, ADC (R), ADc (D), SDM, Asstt. Commissioner General, DORG, DRO, EM, Tehsildar, Commissioners of Municipal Corporations of Amritsar, Jalandhar, Patiala and Ludhiana.

- \* This declaration is to given by all candidates.
- \*\* Any one of these certificates, as applicable to the candidate according to the Punjab Govt. Instructions, is to be given.

### **ANNEXURE-IX**

## OFFICE OF THE TEHSILDAR, BATHINDA BONAFIDE CERTFCATE FOR THE PERMANENT RESIDENTS OF KALJHARANI

### (for Applicant of Kaljharani only)

No	Tehsildar	Bathinda	Dated
Certified th	hat Shri/Smt/M	iss	
Son/Daughter/Wife of			is permanent resident of
Village KALJHARANI, Tehsil Bathinda, District Bathinda, Punjab.			
Further Ce	ertified that the	Certificate has been issue	d in accordance with Punjab Govt. Instructions
contained in Letter No.1-3-	-95/3 PP-II / 96	619 dated 6-6-96 and is cov	vered under Category No
of the said letter.			

Tehsildar

### **ANNEXURE-X**

OFFICE OF	THE TEHSILDAR	
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### **Low Income Certificate**

(for Applicants of SC category only)

No		Date	••••
It is certified that acco	ording to the regional establishm	ment, the annual income ot the whole family	of
Sh. / Smt. / Kumari	S/0	O / D/O./ Wife/O	••••
resident of village	Post Office	Tehsil	••••
District	(Punjab), is less than R	upees	

TEHSILDAR

### **ANNEXURE XI**

### SELF UNDERTAKING OF GAP IN STUDY PERIOD

	ISon/daughter of	
resid	ent of	
(full	address to be given) do hereby solemnly declare and affirm as uno	der:
1.	That I have passed 10+2 examination held in	from
		(School/College)
2.	That I have not joined any college/institution after passing 10+2	
	OR	
	That I have joined the course	at
	(Name of the institution) w.e.f	and will leave the same before joining
	the Diploma in Vety. Science and Animal Health Technology.	
Dated	1 ·	Signature of the Candidate