KARNATAKA STATE OPEN UNIVERSITY, MYSORE

RE-REGISTRATION FORM

YEAR : _____ CYCLE : JULY/JAN

NOTE: 1. FORM FOR STUDENTS WHO HAD ENROLLED IN ALL PROGRAMMES.
2. NO FIELDS SHOULD BE LEFT BLANK. ALL FIELDS ARE COMPULSORY.
3. ALL ENTRIES SHOULD BE MADE IN BLOCK LETTERS ONLY.
4. KINDLY NOTE THE CHANGE IN FEES STRUCTURE.
5. DEPOSIT YOUR RE-REGISTRATION FORM ON OR BEFORE DATES MENTIONED BELOW.
6. CANDIDATE SHOULD FILL THIS FORM IN HIS/HER OWN HANDWRITING.

ATTACH HERE SELF ATTESTED STAMP SIZE PHOTOGRAPH

DO NOT DEFACE IT

1) **Name of the Programme :** ☐☐☐☐☐☐ **Semester** ☐☐☐

2) **Candidate Roll No** : ☐☐☐☐☐☐☐☐☐☐☐☐☐☐
(Given by KSOU at the time of Registration)

3) **Study Centre Code** ☐☐☐☐☐☐

Name of the Study Centre ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
(A Student can change his/her Study Centre and register with any Study Centre of his/her choice only at the beginning of each semester).

4) **Name of the Candidate** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

5) **Address for Correspondence :** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

City ☐☐☐☐☐☐☐☐☐☐ State ☐☐☐☐☐☐☐☐☐ PIN ☐☐☐☐☐☐

6) **Communication Numbers (with STD Code) (O)** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

(R) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **(M)** ☐☐☐☐☐☐☐☐☐☐

E-Mail ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

7) **Elective Stream opted** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐☐☐☐

(Please note that Elective stream/Group once chosen cannot be changed).

8) **Demand Draft Details:**

a) In favour of **Finance Officer, KSOU Payable at Mysore**

Crossed Bank Draft No ☐☐☐☐☐☐ Date ☐☐☐☐☐☐☐☐ Amount (Rs.) ☐☐☐☐

Bank Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

b) In favour of **Roots Infotech Solutions (P) Ltd. payable at Delhi / New Delhi**

Crossed Bank Draft No ☐☐☐☐☐☐ Date ☐☐☐☐☐☐☐☐ Amount (Rs.) ☐☐☐☐

Bank Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Students are advised to write their Name, Roll No., Study Centre Name & Programme applied for on the back of the Bank Drafts without fail.

Date:..... Signature of the Candidate

STUDY CENTRE

This is to certify that candidate have paid the fees as per the dates notified in University approved academic calendar.

Date : (Seal) Signatute of Authorised Signatory

Roots	**KSOU**
Verified By.....	Verified By.....

Academic Collaborative institution: Roots Infotech Solutions (P) Ltd. 1102-04, Pearl Best Heights-I, Netaji Subhash Place, New Delhi. 011-27357701 / 02