

Dy-UCC-3969  
2/2/16

## UNIVERSITY CAMPUS SCHOOL



MAHARSHI DAYANAND UNIVERSITY, ROHTAK  
(A State University established under Haryana Act No. XXV of 1975)  
'A' Grade University Accredited by NAAC

### ADMISSION NOTICE (2016-17)

It is notified for information of all the Teaching and Non-Teaching staff working in the M.D. University Rohtak that registration for the admission of classes **Nursery to IX & XI** (Science and Commerce) is open. Last date of submission of Application form will be **19/03/2016** (Saturday). Admission test (Except Nursery) will be held on **30/03/2016** (Wednesday) at 10:00 AM in University Campus School. (Application Performa given over leaf)

For **Nursery** class a child falling in the age bracket of 3-4 years as on 01/04/2016 will be consider for admission, a recent passport size photo of the child and the Date of birth certificate issued by Municipal Council/Civil Hospital/PGIMS/Registrar of Birth must be submitted in the school office with the application form latest by 19/03/2016 (Saturday).

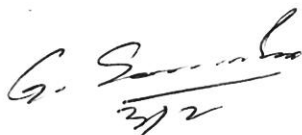
  
Principal 1/2/2016.

Ends. No. 41-100

Dated: 1/2/16

Copy of the above is forwarded to the following for information.

1. P.A. to VC/ Registrar/ COE (for kind information of the Vice-Chancellor/Registrar/ Controller of Examinations), M.D. University, Rohtak.
2. All the Heads of Teaching Deptts./ Offices/ Branches, M.D. University, Rohtak.
3. Director Public Relations, M.D. University, Rohtak for wide publicity.

  
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**REGISTRATION FORM FOR CLASS\_\_\_\_\_ (2016-17)**

(To be completed, signed & submitted by the parents)

To  
The principal  
University Campus school,  
M.D.U. Rohtak

Dear Madam

I Request for admission of my Son/Daughter/Ward to Class\_\_\_\_\_ of your School, I Agree to Abide by rules and regulation of the school, if he/she is selected for admission. The necessary particulars are given below:-

- i) Name of student (block letters)\_\_\_\_\_
- ii) Date of Birth(in fig.)\_\_\_\_\_ (in words)\_\_\_\_\_
- iii) Father's Name(block letters)\_\_\_\_\_ Univ. Employee Yes/No
- iv) Mother's Name(block letters)\_\_\_\_\_ Univ. Employee Yes/No
- v) Residential Address \_\_\_\_\_
- vi) Contact No. \_\_\_\_\_
- vii) Name of Previous School\_\_\_\_\_

Signature of the Parent/Guardian

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For office use only

Admit to Class\_\_\_\_\_

PRINCIPAL