APPLICATION FORM

RAFFLES UNIVERSITY

Personal Details

Name of the Course you are applying for

Name in Full

Gender   ◯ Male   ◯ Female   Date of Birth (DD/MM/YYYY)

Nationality   Category SC/ST/OBC/GEN

Mobile Number   Email Address

Correspondence Address

Permanent Address (if different from Correspondence Address)

Parents Information
Father's Name

Occupation   Mobile No.

Mother's Name

Occupation   Mobile No.

Address

Qualifications

What will be your highest qualification when you start the programme? (School, College, Higher Education..)

Academic Qualifications

Examination Passed	Name of the Board/University	Year of passing	Subjects	Grade / Percentage

SIGNATURE

DATE

PLACE