

**INTERNATIONAL CENTRE FOR DISTANCE EDUCATION AND OPEN LEARNING
HIMACHAL PRADESH UNIVERSITY, SUMMER-HILL, SHIMLA-171005
LIBRARY MEMBERSHIP FORM**

BY REGISTERED POST

The Asstt. Librarian,
ICDEOL Library,
H.P. University, Shimla-5

Sir,

I have gone through the library rules and undertake to observe the same during studentship with the ICDEOL, Himachal Pradesh, University, Shimla-5.

I hereby remit a sum of ₹ as library security by bank draft
IPOs No..... datedin favour of Director, ICDEOL, Shimla-5.
or vide cash receipt No.....

My Particulars are as under:

- a) Name in Full (capital letters) Mr./Ms.....
b) Father's Name
c) Registration No. Class
d) Subject..... Semester.....
e) State if admitted direct to IInd semester, Yes/No.....
f) ICDEOL Roll No.
g) Correspondence Address (capital letters)
.....
.....Pin Code.....
h) Permanent Address (capital letters)
.....
.....Pin Code.....
Ph. No.....E-mail.....

I enclose herewith my two passport size photographs alongwith membership form duly attested by
..... Designation.....
Address

I pledge that I will not misuse the library facilities and in case of any default, I shall be liable to pay the penalty imposed by the Director. .

It is certified that I am not employed and the official address of my parents/guardian is given as under

Name Relation.....
Official AddressPin Code.....

It is certified that I am employed in govt./public sector/private concern as
(designation) official address

I may therefore. be enrolled as a local/outstation member of the library.

Yours faithfully,

Dated.....

Signature of Student

Please do not forget to attach with this the library membership card duly filled in. The same is available with perforation mark with forms DE-14 & DE-15.

FOR OFFICE USE

The particulars of Mr./Ms.
Class.....SubjectICDEOL Roll No.....
Semester have been verified from the relevant
admission record of the student and are correct. He/She is a bonafied student of the ICDEOL. Necessary "no
dues certificate" will be obtained from the library at the time of migration/final examination/termination of
connection by the student from ICDEOL.

Dealing Asst.

Section Officer

Asst./Dy.Registrar ICDEOL

FOR LIBRARY USE

Library membership enrolment form of Mr./Ms.....
is in order. The requisite security amount. (₹ ₹)
only has been paid by the applicant and necessary entry made in the library security register at
Sr. No dated and he/she is enrolled as local/outstation
member of the library under borrower no

Signature of Circulation Asstt.

Asstt. Librarian
ICDEOL Library
H.P. University, Shimla-5

Note: Prescribed Security deposit:
(For all classes/ courses)

₹ 300/- (Refundable)

INTERNATIONAL CENTRE FOR DISTANCE EDUCATION AND OPEN LEARNING
Himachal Pradesh University, Summer Hill, Shimla-171005

RENEWAL FORM

Centre for PCP 1 2 3

Centre for Exam 1 2 3

(In order of preference)

**(To be used for B.A./B.Com./B.C.A./M.A./M.Sc./M.Com./
M.B.A./MMC/MCA and All PG Diplomas)**

Class/course	ICDEOL Roll No.....
Year.....	Tel./Mobile No.....

Fees (₹ (with late fee upto))
(₹ (with late fee upto))
(For fee, please consult the fee structure section of Hand Book of Information)

Remittance

**IPOs/Bank Draft be drawn in favour of the Director, International Centre
for Distance Education & Open Learning, Shimla-171005**

PARTICULARS OF THE STUDENT

- Name (in block letters) Male/Female.....
- Father's Name
- ICDEOL Roll No Examination Roll No.....
- Registration No
- Address for correspondence
.....Ph. No.E-mail.....
- Particulars of fee remitted Rs..... IPOs/Bank
Draft No dated.....
- Please mention the subject and option(where compulsory) 1
(OPTION ONCE EXERCISED IS FINAL) 2
3
4
5

(Please consult the relevant section of Handbook of Information for list of PCP & Exam Centres)

ICDEOL Roll No.	DE -13
ADDRESS SLIP	
(To be filled by the Student)	
Name of the student	
Father's name	
Address	
.....	
.....	
Pin	<input type="text"/>

ICDEOL Roll No.	DE -13
ADDRESS SLIP	
(To be filled by the Student)	
Name of the student	
Father's name	
Address	
.....	
.....	
Pin	<input type="text"/>

I solemnly declare that the information furnished above is correct to the best of my knowledge and that nothing has been concealed by me. I further declare that I am not pursuing simultaneously any other course of study from the Himachal Pradesh University or any other institution/university in any capacity. I am seeking admission to the ICDEOL with prior consent of my employer/guardian. I solemnly affirm that I will abide by all the regulations and instructions issued/to be issued to me regarding submission of assignments/contact programme/examinations etc. and will not do anything against the interest of the ICDEOL or the Himachal Pradesh University.

I further solemnly declare and affirm that no case of the use of unfair means in the examination is pending against me and that I have not been disqualified for the use of unfair means or rusticated or expelled from the Himachal Pradesh University or by any other university institution.

Signature of the Student

Dated.....

Class Roll No.....

- NOTE :**
1. Notwithstanding anything relating to the supply of a renewal admission form by the ICDEOL office, there may be instances where a student does not receive the renewal admission form for reason of non-declaration of his/her result or loss of the renewal form, in transit, the student is advised to use photostat copy of this form and submit the same to the ICDEOL in July/August along with the prescribed fee through IPOs/Bank Draft drawn in **favour of the Director, ICDEOL, H.P. University, Shimla-5.**
 2. The venue can be changed in case sufficient number of students or accommodation at a particular place of the PCP is not available.
 3. About 150 to 200 students will be accommodated at each personal contact programme centre on the basis of "first come first served" principle. Other students will have to attend the personal contact programme at the centre allotted by the ICDEOL.
 4. The exemption from attending the personal contact programme shall not be granted on any grounds except on medical grounds subject to the fulfilment of conditions as stipulated in the hand book of information/university rules in subjects where PCP is compulsory.
 5. No representation for the creation of a new centre for the personal contact programme at any other place will be entertained.
 6. No residential accommodation will be arranged by the ICDEOL during the personal contact programme. The candidate shall have to make their own arrangement.
 7. No admission shall be made after the expiry of the last date as specified.

DE 9 to 16 are to be filled in by the students and submitted to ICDEOL along with fee

FOR B.A. / B.COM. (CBCS) BCA UNDER SEMESTER SYSTEM

INTERNATIONAL CENTRE FOR DISTANCE EDUCATION AND OPEN LEARNING

Himachal Pradesh University, Summer Hill, Shimla- 171 005

Centre for PCP 1 2 3

Centre for Exam 1 2 3
(in order of preference)

Affix latest
passport size
photograph
duly attested

FOR OFFICE USE ONLY

ICDEOL Roll No

Admitted provisionally subject to:

1..... 2..... 3.....

Dealing Assistant.....

Supdt/Section Officer

1. Course/Subject to which admission is sought Class..... Subject..... Semester.....
2. Name of the Applicant in English Male/Female.....
(In capital letters)
in Hindi
3. Father's Name in English (in capital letters)
(In capital letters)
in Hindi
4. SC/ST/Handicapped/BC/OBC Date of Birth
(attach attested copy of High School Certificate showing date of birth)
5. Permanent Home Address
..... Pin Code..... Tel. No./Mob. No.....
6. Correspondence Address
..... Pin Code..... Tel. No./Mob. No.....
E-mail.....
7. Are you Employed (Give Details)
8. Are you already registered as a student with H.P. University: if yes mention your Registration No.
.....
9. Particulars of the last examination taken from any university/Board.
Name of the College/Institution last attended by you Exam Passed
Examination Roll No. Year Session Univ./Board.....
The reasons for leaving the institution/university.....
10. Examination previously passed (attach attested copy(s) of the certificate(s) and degree(s).

Exam Passed	Name of Univ/Board	Year	Roll No.	Max. Marks	Marks Obtained	Div %	Subject Studied
Matric							
10 + 2 or its equivalent							

11. Have you any compartment/re-appear to pass ?
if yes, mention the class/courses/subject/Roll No. Year

12. Have you ever been disqualified/rusticated? If Yes: give details Class Roll No. Year
13. Do you belong to rural/urban area
14. Subjects to be opted for under graduate classes. The student may choose subject combination from structure of syllabus for B.A./B.Com and fill up his/her choice below.

Note : 1 Please refer page No. 9 to 36 for choice of course to be filled below:-

2 No compulsory course can be repeated in any of the semester.

B.A./B.Com. Semester : I / II / III / IV / V / VI Semester (Please tick Semester)

Course Type	CODE	TITLE OF THE COURSE	CREDIT
Major Core Course
Major Core Course
Minor Elective Course (Subject)
Minor Elective Course (Subject)
Compulsory Course
Compulsory Course (Skill Based- if any)
General Interest & Hobby Course

FOR SEMESTER IV ONWARDS ONLY

Course Type	CODE	TITLE OF THE COURSE	CREDIT
Major Course
Elective Core Course (Additional)

Additional Core/Elective Course can be taken in the V & VI Semester for major with emphasis and second major as the case may be.

BCA SEMESTER (I / II / III / IV / V / VI) PLEASE TICK ANY ONE.

COURSE CODE	TITLE OF THE COURSE	CREDIT
.....
.....
.....
.....
.....
.....
.....

(TOTAL CREDITS)

(c) Medium in which lessons are required : **HINDI/ENGLISH**
(Applicable to undergraduate classes only)

15. Fee deposited/remitted ₹ vide cash Receipt No. dated
IPOs/Bank Draft No. dt ₹

(Write your name, address & class on the back side of Bank Draft)

16. I declare that the particulars given above are correct. I fully understand that my admission will stand cancelled if it is discovered at any stage that I do not have the minimum qualification and any information supplied by me is found to be false. I have gone through the admission requirements as laid down by the university for the course. I agree to abide by rules and regulations framed by the University.

I further declare that I am not pursuing simultaneously any other degree from the H.P. University or any other Institutions/University at the same time.

Signature of Father/Mother/Guardian

Signature of the Applicant

12. Have you any compartment/re-appear to pass ?
 if yes, mention the class/courses/subject/Roll No. Year
13. Have you ever been disqualified/rusticated? If Yes: give details Class Roll No. Year
14. Do you belong to rural/urban area
15. Subjects to be offered for under graduate classes

(a)	B.A./B.Com-I	B.A.- II	B.A.- III
	1. English	1. English	1. English
	2.	2. Hindi or Skt. (Core Subjects)	2.
	3.	3.	3.
	4.	4.	4.

- (b) Medium in which lessons are required : **HINDI/ENGLISH**
 (Applicable to undergraduate classes only)

16. Fee deposited/remitted ₹ vide cash Receipt No. dated
 IPOs/Bank Draft No. dt ₹.....

(Write your name, address & class on the back side of Bank Draft)

17. I declare that the particulars given above are correct. I fully understand that my admission will stand cancelled if it is discovered at any stage that I do not have the minimum qualification and any information supplied by me is found to be false. I have gone through the admission requirements as laid down by the university for the course. I agree to abide by rules and regulations framed by the University.

I further declare that I am not persuing simultaneously any other degree from the H.P. University or any other Institutions/University at the same time.

Signature of Father/Mother/Guardian

Signature of the Applicant

HIMACHAL PRADESH UNIVERSITY
Summer Hill, Shimla-171 005
APPLICATION FORM FOR

REGISTRATION AS A STUDENT OF THE UNIVERSITY

(All entries should be filled in by the candidate)

Registration No.

The Registrar,
Himachal Pradesh University,
Shimla-171005 (to be allotted by the university)

(Through : The Director, International Centre for Distance Education & Open Learning (ICDEOL)

Sir,

I request for permission to be registered as a student of the university and submit the following statement duly filled in.

1. *Name of the student (English..... (Hindi)
(in block letters)
2. Father's Name (English..... (Hindi)
(in block letters)
3. Date of Birth
4. Qualifying Exam passed for admission to the course of the University/Board.....
5. College/institution joined: ICDEOL, H.P. University.....
6. Date of joining
7. Permanent Address :.....

Yours faithfully

Address for Correspondence :.....

..... Signature of the student

..... Classyear

CERTIFICATE (For Office use only)

I certify that the above named candidate is not registered in Himachal Pradesh University earlier and has filled up the form himself/herself and I believe the above information to be true.

Dated

Fee (₹

Against No.....

Received and entered

Director (ICDEOL)

DA/SO/AR(A/CS) FO

* Name entered in this form should tally exactly with that entered in the Matriculation or equivalent examination certificate.

Sr. No.....

DE-11

Himachal Pradesh University, Summer Hill, Shimla-171005

EXAMINATION FORM FOR POST GRADUATE AND DIPLOMAS COURSES ONLY

ICDEOL Roll No

Examination Roll No.....

APPLICATION FOR REGULAR EXAMINATION 2014-2015.....

- 1. Examination in which appearing
- 2. Examination centre 1 2 3.....
(In order of preference)
- 3. Name of the candidate (in English)Male/Female.....
(In block letters)
(in Hindi)
- 4. Father's Name : (in English)
(In block letters)
(in Hindi)
- 5. Registration number
- 6. Date of birth (figures & words)
- 7. Do you belong to SC/ST/OBC/BC Yes/No (attach certificate)
- 8. Are you blind/handicapped Yes/No (attach certificate)
- 9. Particulars of the lower examination passed:

Examination	Univ/Board	Session/Year	Roll No.	Subjects	Max.Marks	Percentage	Result	Remarks
.....	1.....	.....	.....	.....	.....
.....	2.....	.....	.....	.....	.....
.....	3.....	.....	.....	.....	.....
.....	4.....	.....	.....	.....	.....

- 10. Are you simultaneously appearing in compartment/re-appear subjects?
if yes, mention name of the examination subjects Roll No
- 11. Subject(s) / course (s) in which to appear in the examination
1
2
3
4

Medium

HIMACHAL PRADESH UNIVERSITY, SUMMER HILL, SHIMLA-171005

(To be filled in by the candidate)

Space for
photograph (duly
attested) for all
candidate

Roll No.....

(To be assigned by the office)

The candidate will be admitted to the examination hall on production and delivery of this Roll No. slip
Admit (name of the candidate)
Son/Daughter of Shri
to the class/Subject/Semester/Year (.....)
to be held inon the dates as given in the date
sheet at Centre of Examination.

Signature of the Candidate.....

Controller of Exams.
Himachal Pradesh University

12. Have you ever been disqualified by any board/university in any examination?
if yes : give detail.....Class Roll No year
13. Permanent home address
14. Correspondence address
15. Particulars of fee deposited: IPOs/B.D./University Receipt No.....
dated amount
16. State to which you belong

I solemnly declare that the particulars given above are correct and that in case of any discrepancy. I shall be responsible for the consequences.

Signature of the Candidate

CERTIFICATE

1. Certified that the candidate has passedform
University or any other examination recognised equivalent thereto by the university.
2. The candidate has remained on the rolls of the ICDEOL for academic year/session preceding the examination.
3. The candidate has submitted 75% of the assignments and has obtained not less than 33% marks there in to earn eligibility to appear in the examination.
4. The candidate has attended the personal contact programme prescribed for the course.
5. The candidate bears a good moral character and that the statement made by him/her in this form is correct as per record of the ICDEOL.
6. The fee of the candidate has been remitted and his/her name has been included in the statement of fee.

Signature with Stamp of attesting authority
International Centre for Distance
Education & Open Learning

Dated.....

CHECK LIST

SR. NO.	PARTICULARS	PARTICULAR NO.	PLEASE TICK
1.	ADMISSION FORM	DE-9(1) / 9(2)	<input type="checkbox"/>
2.	REGISTRATION FORM	DE-10	<input type="checkbox"/>
3.	EXAMINATION FORM (PG STUDENTS ONLY)	DE-11	<input type="checkbox"/>
4.	INDEX CARD	DE-12	<input type="checkbox"/>
5.	ADDRESS SLIPS	DE-13	<input type="checkbox"/>
6.	ACKNOWLEDGEMENT CARD	DE-14	<input type="checkbox"/>
7.	IDENTITY CARD	DE-15	<input type="checkbox"/>
8.	FEE DETAILS	DE-16	<input type="checkbox"/>

Student Signature

Name_____

Place_____

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

ICDEOL Roll No. DE -13

ADDRESS SLIP

(To be filled by the Student)

Name of the student

Father's name

Address

.....

.....

Mobile No.

Pin

INSTRUCTIONS

1. This card testifies the student's status as a student of ICDEOL of HPU subject to confirmation of his/her eligibility for the course.
2. This card is not transferable. The student should carefully keep this card with him/her. It should be available for inspection when demanded by Director or any other member of the staff authorised by the Director on his behalf.
3. The card should be carefully preserved, as no duplicate card will be issued.
4. This card is valid for the duration of the course only. It may be forfeited by the ICDEOL if the student is found guilty of misbehaviour or when any disciplinary action is taken against him/her or he/she discontinues the study.

International Centre for Distance
Education and Open Learning
H.P. University, Shimla-5

Sr. No.

DE-15

**International Centre for Distance
Education and Open Learning
H.P. University, Shimla-5**



IDENTITY CARD

ACKNOWLEDGEMENT CARD

DE-14

Fee of Rs. sent vide D.D./POs No. Dated,
(to be filled in by the student)

Your application for admission to this Please quote this
course has been received. Your Roll No. is
Roll No. in your future correspondence. The ICDEOL Roll No. has been allotted provisionally
subject to confirmation of your eligibility.

Discrepancies found in your form

- (1) M.S. not received.
- (2) Lower exams mark sheet not received
- (3) Fee Rs. required
- (4)
- (5) D.A./Supdt./Section Officer.

Borrower No Valid Up to

**International Centre for Distance Education and Open Learning
H.P. University, Shimla-5
MEMBERSHIP FORM FOR STUDENTS**

Please enrol me as member of the ICDEOL library, I promise to obey all its rules:

Full Name (Block Letters)

Department Class Semester. Roll No.....

Correspondence Address

Father's/Guardian's name and permanent address.....

Dated..... Applicant's full Signature

Attach this card with Form DE-2

**Must affix
latest
passport
size
unattested
photograph**

SESSION 2014-2015

ICDEOL Roll No..... Exam Roll No.....

Class/Semester.....

Name.....

Father's Name.....

Postal Address

.....

.....

Permanent home Address

.....

.....

.....
Signature of the student with date

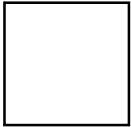
Date.....

*Director
ICDEOL*

Date

Note : Student should fill in the above particulars
except ICDEOL & Exam Roll No.

ADDRESS TO BE FILLED IN BY THE STUDENT



TO

.....

.....

.....Pin.....

From:
**Director,
International Centre for
Distance Education and Open Learning
H.P. University, Shimla-171005**

I recommend that the applicant be enrolled as a member of the ICDEOL Library. I undertake that the library security/detailed marks card will not be released/issued to him/her unless he/she produces clearance certificate from the library. The information furnished overleaf has been verified by my office.

Section Officer

AR/DR ICDEOL
Office Stamp

Asstt. Librarian

Incharge circulation

DE-16	DE-16	DE-16
STATE BANK OF INDIA	STATE BANK OF INDIA	STATE BANK OF INDIA
STUDENT COPY	ICDEOL COPY	BANKS COPY
PAY IN SLIP	PAY IN SLIP	PAY IN SLIP
Payable at all Branches of SBI for Depositi of Fee only	Payable at all Branches of SBI for Depositi of Fee only	Payable at all Branches of SBI for Depositi of Fee only
Credit to HPU ICDEOL Collection A/c No. 32311508209 at SBI Summer Hill, Shimla-5	Credit to HPU ICDEOL Collection A/c No. 32311508209 at SBI Summer Hill, Shimla-5	Credit to HPU ICDEOL Collection A/c No. 32311508209 at SBI Summer Hill, Shimla-5
DETAILS TO BE FILLED BY APPLICANT/CANDIDATE	DETAILS TO BE FILLED BY APPLICANT/CANDIDATE	DETAILS TO BE FILLED BY APPLICANT/CANDIDATE
Form No./Roll No.....Date of deposit.....	Form No./Roll No.....Date of deposit.....	Form No./Roll No.....Date of deposit.....
1. Name of Candidate :	1. Name of Candidate :	1. Name of Candidate :
2. Father's/Mother's Name :	2. Father's/Mother's Name :	2. Father's/Mother's Name :
3. * Class & Year/Semester :	3. * Class & Year/Semester :	3. * Class & Year/Semester :
4. * Type of Fee : <input type="text" value="A"/>	4. * Type of Fee : <input type="text" value="A"/>	4. * Type of Fee : <input type="text" value="A"/>
5. Amount of Fee :	5. Amount of Fee :	5. Amount of Fee :
6. Bank Commission ₹ 30/-	6. Bank Commission ₹ 30/-	6. Bank Commission ₹ 30/-
7. Total amount of fee.....	7. Total amount of fee.....	7. Total amount of fee.....
Signature of Depositor/Candidate	Signature of Depositor/Candidate	Signature of Depositor/Candidate
FOR SBI BRANCH USE ONLY	FOR SBI BRANCH USE ONLY	FOR SBI BRANCH USE ONLY
Journal No. :	Journal No. :	Journal No. :
**Branch Sig./Stamp :	**Branch Sig./Stamp :	**Branch Sig./Stamp :
**Please ensure affixing of Bank stamp alongwith J number and amount in the form also	**Please ensure affixing of Bank stamp alongwith J number and amount in the form also	**Please ensure affixing of Bank stamp alongwith J number and amount in the form also
Note	Note	Note
1. Mere deposit of fee do not entitled any student to be eligible. It will be subject to fulfillment of other conditions also.	1. Mere deposit of fee do not entitled any student to be eligible. It will be subject to fulfillment of other conditions also.	1. Mere deposit of fee do not entitled any student to be eligible. It will be subject to fulfillment of other conditions also.
2. Fee and other details are available on ICDEOL website www.icdeolhpu.org .	2. Fee and other details are available on ICDEOL website www.icdeolhpu.org .	2. Fee and other details are available on ICDEOL website www.icdeolhpu.org .
3. Students are advised to ensure remittance of fixed amount under appropriate heads.	3. Students are advised to ensure remittance of fixed amount under appropriate heads.	3. Students are advised to ensure remittance of fixed amount under appropriate heads.
* Form No./Roll No. : Advertisement No. OR Notification No.	* Form No./Roll No. : Advertisement No. OR Notification No.	* Form No./Roll No. : Advertisement No. OR Notification No.
* In Column 3 above fill Class & Year e.g. B.A. I or M.A. Eng.0IV or B.Com.-II etc.	* In Column 3 above fill Class & Year e.g. B.A. I or M.A. Eng.0IV or B.Com.-II etc.	* In Column 3 above fill Class & Year e.g. B.A. I or M.A. Eng.0IV or B.Com.-II etc.
* In Column 4 above fill type of fee e.g. ICDEOL Prospectus Cost, Admission fee of various courses/degree and other charges if any as asked by the ICDEOL	* In Column 4 above fill type of fee e.g. ICDEOL Prospectus Cost, Admission fee of various courses/degree and other charges if any as asked by the ICDEOL	* In Column 4 above fill type of fee e.g. ICDEOL Prospectus Cost, Admission fee of various courses/degree and other charges if any as asked by the ICDEOL