



ENTREPRENEURSHIP AWARENESS CAMP (EAC)

(05^{th -} 07th February, 2020) Entrepreneurship Development Cell

Shri Mata Vaishno Devi University, Katra

Name of the Applicant:				
• AADHAR			Self-a	attested
Date of Birth:	Gender:		Ph	noto
Degree Pursuing:				
Name of the School:				
Mobile No	Iobile No			
Landline No.:	ernative Mobile No.:			
E-Mail ID Alto	ernative E-mail ID:			
Ctegory : General/Minority/OBC/Others				
• Academic Qualification:				
Title of the Degree	Semester/Year	Subjects	Year	CGPA
Graduation ((like B. Tech., B.Arch., Integrated M.Sc.)				
Post-Graduation ((like M.Sc, MBA students, M.Tech.)				
Any Other				
STATEMENT OF THE SCHOO	OL /DEPARTMENT WHI	(Applicant's Sign		Jame & da
is certified Mr./Ms./Dr. Semester/Year He/She may be carishno Devi University, Kakryal, Katra.				
	(Approved by He	ad of the School with Name, S	Signature, Seal	l and Date)
Last date of receiving applications: 30	th January, 2020			