



CENTRE FOR DISTANCE AND ONLINE EDUCATION

ADMISSION APPLICATION FORM

FOR OFFICE USE

ADMISSION APPLICATION FORM NO.

BATCH

Recent passport size colour photograph (with Blue / White Background)

PROGRAM APPLIED FOR: (Please mark (✓) against the program you wish to apply)

OPEN AND DISTANCE LEARNING

Bachelor of Business Administration Master of Business Administration

ONLINE LEARNING

Bachelor of Business Administration Master of Business Administration

Student's Signature (with blue pen)

ELIGIBILITY CRITERIA - ODL/OL

PROGRAM	ELIGIBILITY CRITERIA	✓
Bachelor of Business Administration (BBA)	Candidate should have passed Senior Secondary Examination (10+2) from any recognized Board.	<input type="checkbox"/>
Master of Business Administration (MBA)	Candidate should have passed Bachelor Degree of minimum 3 years duration (10+2+3 Pattern). Obtained at least 50% marks (45% marks in case of candidates belonging to reserved category) in the qualifying examination.	<input type="checkbox"/>

Dear Sir,

I want to take admission in your University for the Program marked (✓) in the box. I have read the 'Terms & Conditions' of the University given overleaf and agree to abide by the same. My particulars are given below:

Mandatorily to be filled by the applicant:

ABC ID	<input type="text"/>	DEB ID	<input type="text"/>
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Student Details

1. Student's Name (Kindly write the full name in block letters as entered in 10th Marksheet)

WhatsApp No.

Mobile No.

E-mail ID (Compulsory)

2. (a) Father's Name (as entered in 10th Marksheet)

WhatsApp No.

Mobile No.

E-mail ID

(b) Mother's Name (as entered in 10th Marksheet)

Mobile No.

Landline No. (with STD code)

E-mail ID

3. Permanent Address

City:

State:

Pincode:

4. Correspondence Address (Please ignore if same as Permanent Address)

City:

State:

Pincode:

5. Date of Birth (As per Class 10th Certificate):

Date: Month: Year:

6. (a) Aadhaar No: _____

7. Nationality: _____

8. Religion: Hinduism Islam Sikhism Christianity If any other, please specify _____

9. Category (Please tick in the appropriate box): Kindly attach the proof (except general category)

General SC ST OBC If other, please specify _____

10. Blood Group: _____

11. Domicile of Jharkhand: Y N

IF NO, MENTION THE STATE

12. Gender: Male Female

13. Physically Handicapped: Yes No

14. WORK EXPERIENCE (IF APPLICABLE) _____

Company Name: Position Held: Duration:

15. Details of Educational Qualifications :

Qualification	PROGRAMME/COURSE	Board / University	School / College	Year of passing	Aggregate Percentage/CGPA
10th Std					
12th Std					
Graduation					
Any Other <small>(Please Specify)</small>					

Details of Class 10th

Board / University	Year of passing	Total Marks	Marks Obtained	Percentage/CGPA

Subject	Max. Marks	Marks Obtained

Details of Class 12th

Board / University	Year of passing	Total Marks	Marks Obtained	Percentage

Subject	Max. Marks	Marks Obtained

Details of Graduation

Board / University	Year of passing	Total Marks	Marks Obtained	Percentage

	Semester	Max. Marks	Marks Obtained	Percentage
Year I	I			
	II			
Year II	III			
	IV			
Year III	V			
	VI			
Year IV	VII			
	VIII			

In case of Result Awaited, fill the following details:

Name of the Programme/ Examination	Year / Semester	Name of the program / Subject	Tentative Date on which Result is to be declared

16. Declaration to be signed by the Candidate:

I declare that the information given above is true and complete to the best of my knowledge and belief, and if any of it is found to be incorrect, my admission shall stand cancelled and I shall be liable to such disciplinary action as may be decided by the University. The decision of the University will be final

Full signature of the Candidate: _____

17. Declaration to be signed by the Parent/ Guardian:

I undertake the responsibility of paying all dues of my son/daughter/ward regularly and for his/her due compliance with all rules and regulations that are in force from time to time in the University.

Full signature of the Parent / Guardian: _____

UNDERTAKING BY THE APPLICANT

I, the undersigned, _____ S/D/o _____ aged about _____ years

Residence of _____, applying for admission to the ARKA JAIN University, Jharkhand

(hereinafter referred to as "the University") do hereby solemnly affirm and undertake that:

- 1) All information submitted to the University vide the Admission Application form(s) or otherwise in any manner, is complete, factually correct and accurate to the best of my knowledge and is authentic and in case it is found at any time that I have concealed, suppressed or distorted any information/fact, my admission to the University shall stand cancelled and I shall have no claim for refund of fee or otherwise whatsoever against the University.
- 2) The University reserves the right to reject my application form(s) in case not found fit by the University.
- 3) I have read and understood all the contents of the ARKA JAIN UNIVERSITY Open & Distance Learning (AJU-ODL) brochure/website and accept the same and also agree to abide by all the terms and conditions enforced by the University from time to time.
- 4) I will adhere to the provisions of the ARKA JAIN University Act and Statutes, Regulations, Ordinances and Rules made there under, and further Orders, Instructions, Guidelines, Codes, Policies, Directions, Standing orders etc. (hereinafter jointly referred to as "Rules & Regulations") as enforced from time to time by the University and its constituent(s), affiliate(s), sponsoring body, associate(s), successor(s), sister concern(s) and other units, as applicable.
- 5) The University reserves the right to introduce, alter or withdraw at any time, any programme or facility and also to revise the fees and other charges with respect to any programme or facility as deemed appropriate from time to time.
- 6) I clearly understand that my admission is provisional in nature and confirmation of my admission shall be subject to the satisfaction of all the eligibility criteria and other requirements as prescribed by the University.
- 7) I shall study at the University for the complete duration of the programme and if due to any reasons, I leave / withdraw at any time before the completion of programme, I shall have no claim for refund of fee or other charges already paid or whatsoever against the University.
- 8) I agree that I will follow the code of conduct of the university and would not indulge in any kind of indisciplinary activity while inside and outside the university campus. Further, I have never been expelled or debarred from admission in any institute/University in the country on account of being found guilty of, abetting or being part of a conspiracy to promote ragging and further affirm that in case the declaration is found untrue, I am aware that my admission is liable to be cancelled.
- 9) In case of any dispute on any matter or for any unforeseen issues arising that are not covered in the prospectus or interpretation of any content of this, the decision of the University shall be final and binding on me and others concerned.
- 10) I agree that the Courts only in Seraikela Kharsawan district shall have the jurisdiction over all disputes arising in relation to my admission, study and stay at University and in respect of any other matter pertaining to the University.

VERIFICATION

I, above-named applicant, do hereby verify that all the contents of this undertaking are true and correct to the best of my knowledge and nothing has been concealed therein. In case any deviation is found, I myself shall be responsible for the consequences thereof.

Date _____

Signature of Applicant

INDEMNIFICATION

(by Applicant)

I, the undersigned, _____ S/D/o _____ do hereby indemnify the ARKA JAIN University and its constituents, affiliates, sponsoring body, associates, successors, sister concerns and other units, as applicable against;

- 1) All actions, causes, suits, proceedings (including civil and criminal), accounts, claims, liabilities (including statutory liabilities), penalties, demands and costs (including without limitation legal costs), awards, damages, losses and expenses, whatsoever, arising on account of my action or inaction, or otherwise, during the tenure of my programme at the University or thereafter and against all consequences arising thereof.
- 2) All rights and claims by myself, my dependants, next of kin or other legal representatives for compensation for any mishappening in terms of death, suicide, disability, infections, diseases, loss or damage of any kind caused to me in person or otherwise at any point of time in any manner due to any reason, including, but not limited to, during industrial visits, training, tours, conduct of practical, working in laboratories or workshops, stay in residential facility, traveling in the transport or otherwise, within or outside the precincts of the University; and for any loss or damage of cash or valuables or my personal belongings of all kinds including mobile phones, PC, laptop, jewellery or any other personal belongings; and
- 3) All the consequences arising in case anything goes wrong or against the contents of the Undertaking given to the University; and I myself shall be responsible for all consequences whatsoever; and the University shall not be liable in any regard.

Place _____

Date _____

Signature of Applicant

INDEMNIFICATION

(by Parents/Guardian)

The undersigned, _____ S/D/o _____ in the capacity of _____ (Father/Mother/Guardian, specify relation) of the above applicant do hereby indemnify the University and its constituents, affiliates, sponsoring body, associates, successors, sister concerns and other units, as applicable against.

- 1) All actions, causes, suits, proceedings (including civil and criminal), accounts, claims, liabilities (including statutory liabilities), penalties, demands and costs (including without limitation legal costs), awards, damages, losses and expenses, whatsoever, arising on account of action or inaction, or otherwise, during the tenure of my ward's programme at the University or thereafter and against all consequences arising thereof
- 2) All rights and claims by my above said ward, myself, my dependants, next of kin or other legal representatives for compensation for any mis-happening in terms of death, suicide, disability, infections, diseases, loss or damage of any kind caused to my above said ward in person or otherwise at any point of time in any manner due to any reason, including, but not limited to, during industrial visits, training, tours, conduct of practical, working in laboratories or workshops, stay in residential accommodation, travelling in the transport or otherwise, within or outside the precincts of the University; and for any loss or damage of cash or valuables or his personal belongings of all kinds including mobile phones, PC, laptop, jewellery or any other personal belongings; and
- 3) All the consequences arising in case anything goes wrong or against the contents of the Undertaking given by my ward to the University, and I myself and my ward shall be responsible for all consequences whatsoever, and the University shall not be liable in any regard

Place _____

Date _____

Signature of Parents/Guardian

GAP CERTIFICATE

I, _____, S/D/o _____ and resident of _____ do hereby solemnly state & affirm as under:

- 1) That I am a resident of the above said address.
- 2) That I have passed _____ Class in the year _____ from _____ School/College/Institute/University.
- 3) That I have not joined/ been admitted to any School/College/Institute due to _____. (Reason)
- 4) That there is a GAP in my studies from _____ to _____.
- 5) That during this period I was not involved in any offence or illegal activity and that no Criminal case is pending against me in any court of law.
- 6) That I command a good reputation and respect in general public.
- 7) That I have not availed post matric scholarship for the same programme name or course from any College/ University/Institute.

Signature of Deponent

Name

VERIFICATION

Verified that the contents of my above said affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed or misrepresented therein. In case the above facts are found incorrect at any stage then my admission can be cancelled by the University.

Date _____

Place _____

Signature of Deponent

Name

Signature / Stamp of advocate (Notary)

(As Applicable)

FEES DECLARATION FORM (ODL)

CALENDAR YEAR 2025

PROGRAM	PROGRAM DURATION	FEES PAYMENT	
BBA (OPEN AND DISTANCE LEARNING)	3 years (6 semesters)	₹ 12,500/- per semester	Registration fee ₹ 5000/- One Time only
MBA (OPEN AND DISTANCE LEARNING)	2 years (4 semesters)	₹ 17,500/- per semester	Examination Fee ₹ 1000/- per semester

Charges towards Hard Copy of Self Learning Material (SLM) : ₹ 3000/- per semester (optional)
 No Charge for Soft Copy of Self Learning Material (SLM)

DISCLAIMER :

ARKA JAIN University reserves the right to make changes in above policy, as and when deemed necessary.

DECLARATION BY THE STUDENT

I,..... S/O, D/O, W/O,, taken admission in programme clearly understand the fees applicable for the programme. I agree to pay the fees of every semester/year, admission fees and any other fees as applicable during the programme duration by the university.

Date..... Student's name..... Parent's name.....
 Place..... Student's signature.....

FEE SCHEDULE

(for office use only)

SCHEDULE OF FEES PAYMENTS

- 1) NAME _____
- 2) ADMISSION IN _____ BATCH _____
- 3) REGISTRATION FEE _____
- 4) SEMESTER FEE APPLICABLE _____

En/No.

Date

Rs.

Rs.

S.No.	Details	Amount in Rs.	Status <small>(Paid / To be Paid)</small>	Remarks (Date of Payment / Due Date)
1.	At the time of Admission			
2.	1st Semester <small>(Due Amount)</small>			
3.	2nd Semester			
4.	3rd / 4th / 5th / 6th Semester			<i>Within 15 days of completion of semester exam</i>

Name of Admission Executive: Signature

Name of Approval Authority: Signature

Important:

1. If payment is made via QR Code in university bank account, the same needs to be brought into notice within one day of payment either physically or transaction details needs to be shared through email info@ajucde.ac.in mentioning your application number.
2. Fees will be accepted only through Cash / Card Swipe / Demand Draft.
3. In case of failure to make the payment before the due date, fine as per the rules, will be imposed.
4. No individual reminder for Fee payment will be given to either student or parent. Students are requested to adhere to the schedule given above and keep themselves updated with notices on the notice board or follow the fee schedule given at the time of admission.

Disclaimer : ARKA JAIN University reserves the right to make changes in above policy, as and when deemed necessary.

Date:

Student's Name

Student's Signature

FEES DECLARATION FORM (ONLINE)

CALENDAR YEAR 2025

PROGRAM	PROGRAM DURATION	FEE TYPE	FEE
ONLINE MBA	2 years (4 semesters)	Registration Fees	₹ 5,000/-
		Semester Fees (Four Semesters)	₹ 22,500/-
		Examination Fees / Semester (Four Semesters)	₹ 1,500/-
		Convocation Fees	₹ 2000/-
		TOTAL FEES	₹ 1,03,000/-

DISCLAIMER :

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DECLARATION BY THE STUDENT

I,..... S/O, D/O, W/O,, taken admission in programme clearly understand the fees applicable for the programme. I agree to pay the fees of every semester/year, admission fees and any other fees as applicable during the programme duration by the university.

Date..... Student's name..... Parent's name.....

Place..... Student's signature.....

SCHEDULE OF FEES PAYMENT

Sl. No.	Program Duration	FEE	Remarks
1	At the time of admission	₹ 30,500/-	Registration Fees = ₹ 5,000 1st Semester Fees = ₹ 22,500 Examination Fees (1st & 2nd Semesters) = ₹ 3,000
2	Within 15 days of 1st Semester end examination or as per the fees submission notification	₹ 22,500/-	2nd Semester Fees = ₹ 22,500
3	Within 15 days of 2nd Semester end examination or as per the fees submission notification	₹ 25,500/-	3rd Semester Fees = ₹ 22,500 Examination Fees (3rd & 4th Semesters) = ₹ 3,000
4	Within 15 days of 3rd Semester end examination or as per the fees submission notification	₹ 22,500/-	4th Semester Fees = ₹ 22,500
5	Convocation Fees	₹ 2,000/-	To be paid as per the Convocation Notification
	Total Fees to be Paid	₹ 1,03,000/-	

MODE OF PAYMENT OF FEES :

Cash /Card Swipe /Online Payment / UPI / Demand Draft in favour of ARKA JAIN UNIVERSITY A/C D and O. E. (Payable at Jamshedpur).

IMPORTANT

1. Fees will be accepted only through Cash / Card Swipe / Online Payment / UPI / Demand Draft in favour of ARKA JAIN UNIVERSITY A/C D and O. E.
2. In case of failure to make the payment before the due date, fine as per the rules, will be imposed.
3. If payment is not made within scheduled days of the due date along with late fine, it may lead to cancellation of admission.
4. Examination Fees/Re-examination Fee / Backlog paper exam fee will be charged as per the notification of department of examination (End Sem Exam Charges - 1500/-)
5. No individual reminder for Fee payment will be sent to either the student or parent/guardian. Students are requested to adhere to the schedule given above and keep themselves updated with notices on the notice section of the websites of AJU CDOE and ONLINE AJU or follow the fee schedule given at the time of admission.
6. All scholarships, if availed, will be adjusted in the 2nd Semester Fee of the first-year fee.
7. If payment is made via QR Code / NEFT / RTGS in university bank account, the same needs to be brought into notice within 3 days of payment either physically or transaction details needs to be shared through email to info@ajucde.ac.in mentioning your enrollment number. In case of any delay in informing about the amount as per the above-mentioned no. of days, a one-time penalty of Rs. 500/- will be charged.
8. Students and parents/guardians are advised not to handover any cash/card swipe/online payment/UPI/ DD to any university or non-university officials / person other than to the designated accounts department employee. University will not be responsible for any payment made to any unauthorized university / non-university official / person.

Disclaimer: ARKA JAIN University reserves the right to make changes in above policy, as and when deemed necessary.

CHECKLIST (FOR APPLICANT)

DOCUMENTS REQUIRED

DOCUMENTS	VERIFIED / NOT VERIFIED	DATE OF SUBMISSION	AUTHORISED SIGNATURE
Transfer Certificate			
Migration Certificate			
10th Admit Card <small>(For Name and DOB Verification)</small>			
10th Mark sheet <small>(For Name and DOB Verification)</small>			
12th Admit Card <small>(Self Attested copy)</small>			
12th Mark sheet <small>(Self Attested copy)</small>			
Graduation Mark Sheet <small>(Self Attested copy)</small>			
Blood Group			
Passport Photo (6)			
Aadhaar Card (Student)			
Caste Certificate <small>Mandatory incase of SC/ST/OBC Candidate</small>			
DOMICILE <small>Related Document</small>			
Any Other : _____			
ABC/NAD ID :			
DEB ID :			

* All the above mentioned documents need to be presented in original at the time of admission for verification.

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VERIFICATION (BY UNIVERSITY OFFICIAL)

Eligibility checked based on the documents submitted : Eligible Not Eligible

Reason if Not Eligible _____

Admission Status

Approved Not Approved

ENROLLMENT NO

Admission Executive Signature with Date

Admission Approval Authority Signature

Verified by the Record Cell