



Assam Rajiv Gandhi University of Cooperative Management

A Govt. of Assam University

Recognised by UGC and member of Association of Indian Universities

Basic tinali, Gadadhar Nagar, Joysagar

Sivasagar 785665

Email: [info.argucom@gmail.com](mailto:info.argucom@gmail.com)

### **Instructions for filling up of Application form 2019**

#### **1. Filling up the form:**

- Open the application form in Acrobat Reader and fill up the provided fields
- Filling up of all prescribed fields (except MAT/ XAT/ CAT details) are mandatory.

#### **2. Photo & Signature:**

- The photo and signature should be affix on the application form. Please affix a passport size photograph on designated place and duly cross signature on it. Without signature of the applicant, the application will not be treated for acceptance.

#### **3. Payment of Application fees:**

- The applicant has to make a non-refundable application fee of **Rs. 700/-** (for General/OBC) or **Rs. 350/-** (for SC/ST-P/ST-H/PWD) through a demand draft from any nationalized bank drawn in favor of “**Assam Rajiv Gandhi University of Cooperative Management**” payable at **Sivasagar**.

#### **4. Submission:**

- Send the hard copy of the filled in application form and the demand draft to the University **by post/ courier/ in hand** in the address below.

**N.B: For further queries please contact us at:**

**Email: [info.argucom@gmail.com](mailto:info.argucom@gmail.com)**

**Phone: 94351-57530 (Admission Coordinator)**

**Address:**

**Assam Rajiv Gandhi University of Cooperative Management**

**Basic Tinali, Gadadhar Nagar,**

**Joysagar, Sivasagar-785665**



# ASSAM RAJIV GANDHI UNIVERSITY OF COOPERATIVE MANAGEMENT, SIVASGAR

## APPLICATION FORM 2019



Course  
Opted For:

Application No.  
(Office Use  
Only)



APPLICANT NAME:

FATHER'S NAME:

MOTHER'S NAME:

ADDRESS:

CITY:  STATE:  PIN:

EMAIL ADDRESS:  PHONE NUMBER:

DATE OF BIRTH:  GENDER:

CATEGORY:  BLOOD GROUP:



QUALIFYING EXAMINATION  STATUS

YEAR OF PASSING: (if applicable)  PERCENTAGE/  
CGPA:

INSTITUTION/ UNIVERSITY:

MAT/ XAT/ CAT SCORE:  MONTH & YEAR:

I hereby declare that the entries made by me in this application form are correct and true to the best of my knowledge.

PLACE:  DATE:

*Applicant's Signature*