

KARNATAKA SAMSKRIT UNIVERSITY
PAMPA MAHAKAVI ROAD, CHAMARAJAPETE, BANGALORE-18

APPLICATION FORM

(DIRECTORATE OF SAMSKRIT EDUCATION)

Paste your recent passport size photo to be attested by Principal/HM

1. NAME OF THE STUDENT :
IN BLOCK LETTERS IN ENGLISH (AS IN SSLC MARKS CARD)
 2. NAME OF THE FATHER :
 3. NAME OF THE MOTHER :
 4. DATE OF BIRTH (Enclose Proof) : Age :
 5. GENDER :
 6. NATIONALITY : RELIGION : CASTE:SC/ST/OBC/GENERAL
(Caste Certificate should be attached)
 7. NAME OF THE PATASHALA :
 8. COURSE : SAHITYA / VEDA MOOLA
 9. YEAR : 2025-26
 10. DETAILS OF PREVIOUS EXAM QUALIFIED (Enclose Proof:)

Registration Number	Name of the Course	Year of Passing	Name of the Patashala

KARNATAKA SAMSKRIT UNIVERSITY
PAMPA MAHAKAVI ROAD, CHAMARAJAPETE, BANGALORE-18
(DIRECTORATE OF SAMSKRIT EDUCATION)
HALL TICKET

REGISTRATION NO.

[illegible]

NAME OF THE STUDENT :

COURSE : SAHITYA/VEDA MOOLA YEAR : 2025-26

Name of the Center and Code :

(Details below to be filled by the Invigilator)

Date of the Exam						
Time of the Exam						
Signature of the Invigilator						

Paste your recent passport size photo to be attested by Principal/HM

Signature of The Principal / Head Master

Signature of the Director

P.T.O.

11. DETAILS OF EXAM APPEARING:

SI NO	PAPER NAME	PAPER NUMBER	PAPER CODE	TITLE OF THE PAPER
1.	SAMSKRIT	01	SL-01 (S)	
2.	KANNADA	01	SL-01 (K)	
3.	ENGLISH	02	SL-02 (E)	
4.	HINDI	02	SL-02 (H)	
5.	SAHITYA SOURABHAM-1 (GADYA, PADYA ETC...)	03	S-01	
6.	SAHITYA SOURABHAM-2 (NATAKA, CHAMPU ETC...)	04	S-02	
7.	VYAKARANA SOURABHAM	05	S-03	
8.	TARKA SOURABHAM	06	S-04	

12. FEE DETAILS

FEE PAID	TRANSACTION. NO	TRANSACTION DETAILS	BANK NAME AND BRANCH

Signature of the Student

This is to certify that s/o has acquired the required attendance to appear for exam and he/she has been issued a receipt for the exam fee has paid.

Signature of Principal/Head Master