



CENTRE FOR E-LEARNING

KERALA AGRICULTURAL UNIVERSITY
IT-BT Complex, Vellanikkara-680 656



Application form for Online Certificate Course

Courses offered

- | | | |
|--------------------------|-----|---|
| <input type="checkbox"/> | OAM | Organic Agricultural Management |
| <input type="checkbox"/> | PNM | Plant Propagation & Nursery Management |
| <input type="checkbox"/> | PHM | Post Harvesting Management & Marketing of Fruits & Vegetables |

Course Preference (Enter the course code according to your choice)

- Choice - 1 :
Choice - 2 :
Choice - 3 :

1. Full Name (Initials last) :
2. Age & Date of Birth :
3. Gender : Male/Female
4. Name of Father/Guardian :
5. Nationality :
6. Address for Communication :
(With District & PIN Code)
7. Land Phone with STD Code :
8. Mobile Phone :
9. E-mail ID :

10. Qualification

Category of qualification	Write your qualification
Plus Two / Pre degree / V.H.S.C. / Diploma / Equivalent	
Higher Qualifications, if any	

11. Details of Application Fee

Transaction ID/Account No.	Date	Amount	From which Bank

Declaration:

I hereby declare that I have read and understood the conditions of eligibility for the programme for which I seek admission. I fulfill the minimum eligibility criteria and I have provided necessary proof in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable to cancellation at any time and I shall not be entitled to refund of any fee paid by me for the programme. I have carefully studied the stipulations of the online courses of the Centre for E-learning, KAU as said in the Prospectus and I accept them and shall not raise any dispute in future over the same.

Place :

Signature of the Applicant

Date :