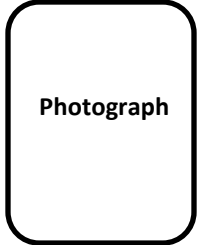




HIMACHAL PRADESH NATIONAL LAW UNIVERSITY
GHANDAL, SHIMLA
P.O. SHAKRAH, SUB-TEHSIL DHAMI
DISTRICT SHIMLA, HIMACHAL PRADESH-171014
Ph. 0177-2779802, 0177-2779803, Fax: 0177-2779802
Website: <http://hpnl.ac.in>

ADMISSION 2019-20
(APPLICATION FORM FOR INTERNATIONAL STUDENTS AND NRI)



- (1) Application for B.A. /B.B.A LL.B. (Hons) & LL.M. (One Year Programme) _____
(2) Application Fess (in Indian Rupee) _____

DETAIL OF FEE

AMOUNT.....D.D. No. DATE

(The Demand Draft (D.D.) of **Rs 3000/-** in Favor of **Registrar, HPNLU, Payable at Shimla OR payment through SBI Collect online.**)

(3) NAME (IN BLOCK LETTERS) _____

(4) Gender: Male Female Other

(5) Category:

(I) General Category (III) Scheduled Tribes (V) Any other Category

(II) Scheduled Caste (VI) Differently Abled

(6) Date of Birth: Day _____ Month _____ Year _____

(7) E-mail Id. _____

(8) Nationality _____ Passport No. _____

(9) Domicile Country _____

Contact Details

(10) Postal Address :

Phone No. with S.T.D. Code _____ Mobile _____

(11) Permanent Address:

Phone No. with S.T.D. Code _____ Mobile _____

Family Details

(12) Mother's Name _____ Occupation _____

(13) Occupation & Office Address

(14) Mother's E-mail _____ Contact No _____

(15) Mother's Mobile No. _____ Fax No. _____

(16) Father's Name _____ Occupation _____

(17) Occupation & Office Address

(18) Father's E-mail _____ Contact No _____

(19) Father's Mobile No. _____ Fax _____

Academic Qualification

Class	Stream	Name of School/Board	Year of Passing	Percentage of Marks/CGPA

Declaration:

I fulfill all the eligibility conditions. I have not been debarred from taking admission in any educational Institution in India. The information given by me in my application form is true to the best of my knowledge and belief.

PLACE _____

DATE _____

(SIGNATURE OF CANDIDATE)

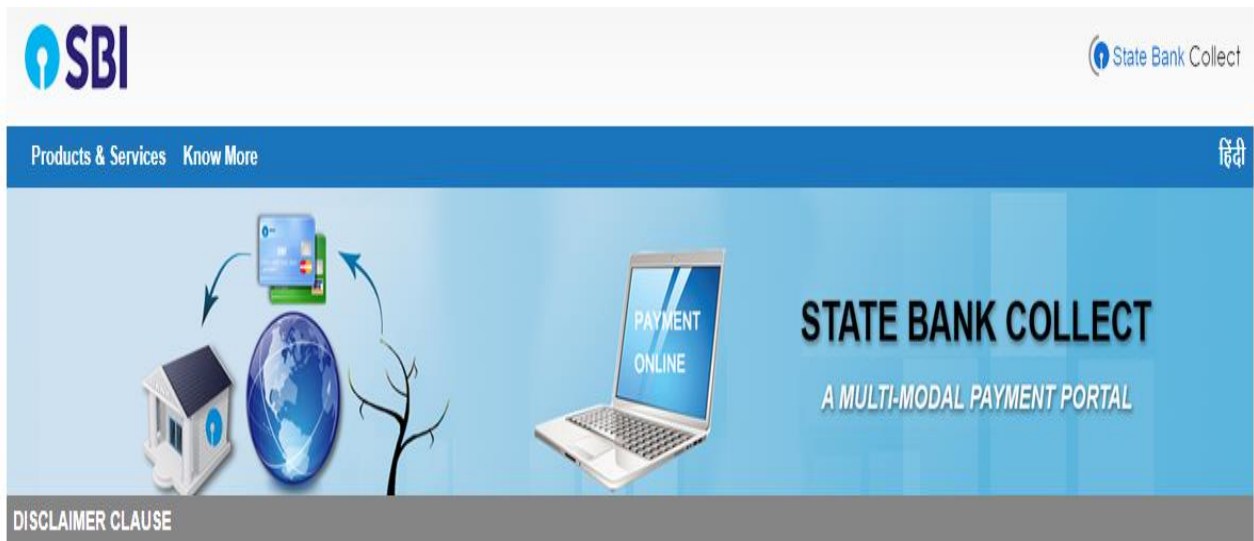
DOCUMENT TO BE ATTACHED

- (1) Three passport size photographs
- (2) Self-attested copies of:
 - (I) Matric certificate containing date of birth
 - (II) Qualification (marks sheet or degrees)
 - (III) Proof of NRI/NRI sponsored (supporting document)
 - (IV) Any other relevant document

SEND COMPLETE APPLICATION FORM AT THE FOLLOWING ADDRESS BY 31st MAY, 2019:

**REGISTRAR
HIMACHAL PRADESH NATIONAL LAW UNIVERSITY
GHANDAL, P.O. SHAKRAH, SUB-TEHSIL DHAMI
DISTRICT SHIMLA,
HIMACHAL PRADESH-171014**

Procedure for Submission of Fee through SBI collect



The banner features the SBI logo on the left and the State Bank Collect logo on the right. Below the logos, there is a navigation bar with 'Products & Services' and 'Know More' on the left, and 'हिंदी' on the right. The main content area shows a diagram of a payment flow involving a bank building, a globe, and a laptop displaying 'PAYMENT ONLINE'. The text 'STATE BANK COLLECT' and 'A MULTI-MODAL PAYMENT PORTAL' is prominently displayed. A 'DISCLAIMER CLAUSE' section is visible at the bottom of the banner area.

Terms Used

- > Corporate Customer: Firm/Company/Institution (F/C/I) collecting payment from their beneficiaries.
- > User: The beneficiary making a payment to F/C/I for the services/goods availed.
- > Bank shall not be responsible, in any way, for the quality or merchantability of any product/merchandise or any of the services related thereto, whatsoever, offered to the User by the Corporate Customer. Any disputes regarding the same or delivery of the Service or otherwise will be settled between Corporate Customer and the User and Bank shall not be a party to any such dispute. Any request for refund by the User on any grounds whatsoever should be taken up directly with the Corporate Customer and the Bank will not be concerned with such a request.
- > Bank takes no responsibility in respect of the services provided and User shall not be entitled to make any claim against the Bank for deficiency in the services provided by the Corporate Customer.
- > The User shall not publish, display, upload or transmit any information prohibited under Rule 3(2) of the Information Technology (Intermediaries guidelines) Rules, 2011.
- > In case of non-compliance of the terms and conditions of usage by the User, the Bank has the right to immediately terminate the access or usage rights of the User to the computer resource of the Bank and remove the non-compliant information.

I have read and accepted the terms and conditions stated above.

(Click Check Box to proceed for payment.)

Proceed

Select State and Type of Corporate / Institution

State of Corporate / Institution *

Type of Corporate / Institution *

Go

- Mandatory fields are marked with an asterisk (*)
- State Bank Collect is a unique service for paying online to educational institutions, temples, charities and/or any other corporates/institutions who maintain their accounts with the Bank.

Select State and Type of Corporate / Institution

State of Corporate / Institution *

Type of Corporate / Institution *

Go

- Mandatory fields are marked with an asterisk (*)
- State Bank Collect is a unique service for paying online to educational institutions, temples, charities and/or any other corporates/institutions who maintain their accounts with the Bank.

Select from Educational Institutions

Educational Institutions Name *

-- Select Educational Institutions -- ▾

Submit

Back

▪ Mandatory fields are marked with an asterisk (*)

Select from Educational Institutions

Educational Institutions Name *

HIMACHAL PRADESH NATIONAL LAW L ▾

Submit

Back

▪ Mandatory fields are marked with an asterisk (*)



HIMACHAL PRADESH NATIONAL LAW UNIVERSITY
GHANDAL, SUB TEH DHAM, SHIMLA-171014

Provide details of payment

Select Payment Category *	fees <input type="button" value="v"/>
COURSE *	PHD -
BATCH *	2019-20 -
NAME *	<input type="text"/>
ENROLLMENT ID	<input type="text"/>
FAIRER NAME *	<input type="text"/>
CATEGORY *	<input type="text"/>
CONTACT NO. *	<input type="text"/>
EMAIL ID *	<input type="text"/>
FEES *	<input type="text"/>

Remarks

(Please enter your Name, Date of Birth (For Personal Banking) / Incorporation (For Corporate Banking) & Mobile Number. This is required to reprint your e-receipt / remittance (TRF) form, if the need arises.

Name *	<input type="text"/>
Date Of Birth / Incorporation *	<input type="text"/> <input type="button" value="v"/>
Mobile Number *	<input type="text"/>
Enter the text as shown in the image *	<input type="text"/> <input type="button" value="8AE40"/>

Mandatory fields are marked with an asterisk (*)

The payment structure document if available will contain detailed instructions about the online payment process.

Date specified (if any) should be in the format of 'ddmmyyyy'. Eg., 02082008