



# UNIVERSITY OF CALICUT

## APPLICATION FOR TOKEN REGISTRATION FOR CCSS DEGREE (REGULAR AND S.D.E. CANDIDATES)

### DETAILS OF FEE REMITTED

Photo  
(passport size)

Amount	Date	Number	Place of remittance

Name and designation of the  
attesting officer :

Signature of the candidate :  
(To be signed in the presence of the attesting officer)

Name of the Programme :  
 Name of the Candidate (In Block Letters) :  
 Gender : Male/Female  
 Mobile Number :  
 E-Mail ID :  
 Date of Birth :  
 Address for Communication (with PIN) :  
  
 Centre of Exam. :  
 Previous Register Number :  
 Semester for which token registration is applied for :

### COURSES APPLIED FOR:

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_
- 5 \_\_\_\_\_
- 6 \_\_\_\_\_

I hereby declare that the entries made above are correct to the best of my knowledge.

CU Campus

Date:

SIGNATURE