



DRISHTI INSTITUTE OF DISTANCE LEARNING

40, 1st Floor, Rangappa Street, Chikkamavalli, Bangalore - 560 004
Email : sangpur@rediffmail.com Tel : +91.80.26560564

APPLICATION FORM

No. _____

PGDRA PGDCT MLE

Date : PGDIPR PGDPV PGDPM

Affix your recent passport size photograph with signature

Name of the Candidate: _____

Date of Birth : _____ Sex: M/F _____

Address: _____

Tel (M): _____ (R) _____

E-mail: _____

Academic Qualifications (Please mention the highest qualification)

Examination Passed	University	Year	Division/Comments if any

(Attach highest qualification certificate)

Payment details: DD in favour of "DRISHTI INSTITUTE OF DISTANCE LEARNING" Payable at Bangalore.

DD No: _____ For Rs: _____ Dated: _____

of _____ Bank

Place: _____

Date: _____

SIGNATURE OF THE APPLICANT

Complete applications should be sent to the Course Director

For official use only:

Application No: Enrolment No: