



M. S. RAMAIAH UNIVERSITY OF APPLIED SCIENCES

(Private University Estd. in Karnataka State by Act No. 15 of 2013)

University House, Gnanagangothri Campus, New BEL Road, MSR Nagar, Bengaluru - 54

Tel. : +91 80 4536 6666 | Fax: +91 80 4536 6677 www.msruas.ac.in

ADMISSION ENQUIRY FORM Date:.....

Name of the Candidate:

| | | |
|---|---------------------------|-----------|
| First Name | Middle Name | Last Name |
| Gender | Male/ Female/ Transgender | |
| Name of the Parent/ Guardian | | |
| State of Domicile | | |
| Nationality | | |
| Qualifying Exam Passed/ Appeared | | |
| Address for Correspondence | | |
| Email Id: | | |
| Contact No: | | |

Programme of Interest: (Please Tick the appropriate course)

| UG Program | PG Program | PhD Program |
|------------|------------------------------------|------------------------|
| B.Tech | M.Tech | Engineering |
| B.Design | M.Design | Art & Design |
| BHM | MBA | Management |
| BDS | M.Com | Chemistry |
| B.Pharm | M.Sc | Physics |
| Pharm-D | M.Pharm | Mathematics |
| | MHA | Hospitality Management |
| | MDS | Dental Sciences |
| | MBA- Hospitality Management | Pharmacy |
| | MBA- Pharma Business Management | |
| | MBA- Innovation & Entrepreneurship | |

How did you come to know of this University- information obtained through (Please tick)

| | |
|-----------------------------|-------------------|
| Newspaper Advertisement | Existing Students |
| Website/ Search Engine | Brochure |
| Notice Board | Education Fairs |
| Word of Mouth | Others: |
| Your Query (if any): | |

Signature of the Candidate /Enquirer

Signature of the Admission Counselor