



DIRECTORATE *of* ADMISSIONS *and* COMPETITIVE EXAMINATIONS

University of Kashmir

Counseling Form
(Session-2018)

Name of the candidate: _____

Parentage _____

R/o: _____

Form No./Entrance Test Roll No: _____

Programme/Course _____ Category _____

	Preference (Campus/College)	Acad. %age	Ent. Points
I			
II			
III			
IV			
V			
VI			

Dated: _____

Signature of the Candidate