



RKDF UNIVERSITY RANCHI

BUS REGISTRATION FORM

Session.....To.....
Year.....

Photo

1. Name of the Applicant (in Block Letter) : _____
2. Course Applied for : _____
3. Department : _____
4. Father's Name : _____
5. Mother's Name : _____
6. Date of Birth : _____ Aadhar Number _____
7. Blood Group: _____
8. Email ID: _____ Parents Emergency No: _____
9. Mobile No.: _____ Whatsapp No: _____
10. University Bus Service Route: _____
Morning Pickup: _____
Afternoon Drop-off: _____
Sibling(s) catching the same bus: _____
11. Permanent Address : _____

12. Name and Address of Local Guardian / Hostel
Warden _____

Declaration

I hereby declare that I will abide all rule regulation of bus with university norms and I am opted bus regularly in my own decision, if I will leave the bus I will inform the university of Account department prior to one week before.

Signature of Student

Date :.....

Place:.....