



**SRI VENKATESWARA VEDIC UNIVERSITY, TIRUPATI**

(Established under A.P.Act 29/2006)

(Sponsored by T.T.D., and Recognized by U.G.C)

**Application for Certificate Course in YOGA**

Affix recent  
passport size  
photograph  
duly attested  
by a Gazetted  
Officer

1. Name of the Candidate with Surname: \_\_\_\_\_  
(Full name in block letters )
2. Name of the Mother: \_\_\_\_\_
3. Name of the Father : \_\_\_\_\_
4. Date of Birth: \_\_\_\_\_ 5. Age: \_\_\_\_\_
6. Education Qualification: \_\_\_\_\_
7. Place of Birth: \_\_\_\_\_
8. Nationality: \_\_\_\_\_ 9. Religion: \_\_\_\_\_
10. Address for Communication: \_\_\_\_\_

11. Permanent address for correspondence: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Aadhar No: \_\_\_\_\_

13. Mobile & Email.ID: \_\_\_\_\_

14. Application Fee: Rs.100/- (To be drawn in favour of the Registrar, S.V.Vedic University, Tirupati)

Bank & Branch Name	DD.No.&Date	Drawn in favour of	Amount

Place:

Date:

Signature of the Candidate