



BABASAHEB BHIMRAO AMBEDKAR UNIVERSITY LUCKNOW

APPLICATION FOR STUDENTS' RAILWAY CONCESSION/MST

1. STUDENT NAME/FATHER NAME.....
2. SCHOOL/DEPTS.....
3. CLASS.....
4. SEMESTER.....
5. AGE/DATE OF BIRTH.....
6. CASTE (SC/ST/GENRAL).....
7. PLACE OF VISIT.....
8. PURPOSE OF VISIT.....
9. DURATION OF VISIT.....
10. TYPE OF CONCESSION FORM:
 - (a) QUARTERLY/SEASONAL TICKET.....
FOR ADDRESS OF RESIDENCE TO UNIVERSITY.....
.....
 - (b) CONCESSION FORM FOR ATTENDING EXAMINATION/INTREW ETC.....
.....
 - (c) ATTACH RELEVANT ENCLOSURE.....

SIGNATURE OF THE STUDENT

THIS IS TO CERTIFY THAT INFORMATION GIVEN ABOVE IS TRUE AND THIS CONCESSION FACILITY MAY BE TO THE STUDENT.

COUNTER SIGNATURE OF THE
OFFICE INCHARG
(STUDENTS' WELFARE)

SIGNATURE AND SEAL OF THE
COORDINATOR/INCHARGE OF
SCHOOL/DEPTT.