



Application Form for Change of Personal Information

Instructions

- ✔ Fill up this form and complete the formalities.
- ✔ Personal Information is defined as: **Address, Contact Number, Email Id, Blood Group, Date of Birth & Guardian Info.**
- ✔ Please check all of your information carefully before submitting the form to the ARRU.
- ✔ All changes require a valid picture ID and legal documents as indicated in this form.

Name: _____

Student ID: _____ Batch: _____

Program: _____

Part 1 Personal Information (Complete this part with your existing information as it appears on UU record)

Present Address: _____

Permanent Address:

[illegible]

Blood Group: _____ Date of Birth:

Guardian Name: Guardian Cell Number: Relation:

Part 2 Requested changes (New/correct information you would like changed to your UU record)

Select one or more items to change as per required

☐ Present Address: _____

☐ Permanent Address:

[illegible]

☐ Blood Group: _____ ☐ Date of Birth:

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☐ Guardian Name: _____ Guardian Cell Number: _____ Relation: _____

Part 3	Proof presented for change (Please attach a copy of one or more type of document as per required)
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☐ SSC Certificate/Transcript ☐ O Level Certificate/Transcript ☐ NID Copy ☐ Passport

☐ Electricity Bill ☐ Others

Part 4 Declaration and Student signature

I certify that the information provided on this form and within any attached documentation is accurate and free of alteration or falsification. I understand that if at any time it is proven that I have misrepresented any information and documents of UU, my profile may be blocked.

Signature of the Student

Date:

Day

Month

Year

Part 5 For Office Use Only

Chairperson/Head of the Department	ARRU (Office of the Registrar)
<div style="border-top: 1px solid black; width: 80%; margin-left: auto;"></div> Signature with Date & Seal	<div style="border-top: 1px solid black; width: 80%; margin-left: auto;"></div> Concerned Officer Signature with Date & Seal