

DR. B.R. AMBEDKAR NATIONAL LAW UNIVERSITY, SONEPAT

(Established by the Haryana State Legislature Act No. 15 of 2012)

ADMISSION FORM FOR SESSION 2025-26

ONE YEAR LL.M. PROGRAMME

Staple Six passport size photos

TO BE FILLED BY THE UNIVERSITY	

1.	University Registration No.:	Paste Passport Size
2.	University Roll No. :	Coloured Photo

FOR STUDENTS

PARTICULAR	DETAILS			
STUDENT NAME (IN CAPITAL LETTERS)				
CLAT ROLL NO.				
ALL INDIA CLAT RANK				
DATE OF BIRTH				
GENDER (MALE/FEMALE/THIRD GENDER)				
MOBILE NO.				
EMAIL-ID				
AADHAAR NO.				
PARIVAR PEHCHAN PATRA NO. (NOTE: Mandatory for Haryana Candidates Only)				
NATIONALITY				
RELIGION				
ANTI-RAGGING UNDERTAKING REF. NO.				
BLOOD GROUP				
WHETHER PWD (Yes/No)				
If PWD Candidate - Mention the disability.				
Blindness and Low Vision				
Deaf and Hard of Hearing				
Locomotor Disability including Cerebral Palsy, Le	bility including Cerebral Palsy, Leprosy Cured, Dwarfism, Acid Attack Victims, and			
Muscular Dystrophy				
Autism, Intellectual Disability, Specific Learning Disability, and Mental Illness				
Multiple Disabilities including Deaf-Blindness and Others				
	STUDENT NAME (IN CAPITAL LETTERS) CLAT ROLL NO. ALL INDIA CLAT RANK DATE OF BIRTH GENDER (MALE/FEMALE/THIRD GENDER) MOBILE NO. EMAIL-ID AADHAAR NO. PARIVAR PEHCHAN PATRA NO. (NOTE: Mandatory for Haryana Candidates Only) NATIONALITY RELIGION ANTI-RAGGING UNDERTAKING REF. NO. BLOOD GROUP WHETHER PWD (Yes/No) If PWD Candidate - M Blindness an Deaf and Har Locomotor Disability including Cerebral Palsy, Le Muscular I Autism, Intellectual Disability, Specific	STUDENT NAME (IN CAPITAL LETTERS) CLAT ROLL NO. ALL INDIA CLAT RANK DATE OF BIRTH GENDER (MALE/FEMALE/THIRD GENDER) MOBILE NO. EMAIL-ID AADHAAR NO. PARIVAR PEHCHAN PATRA NO. (NOTE: Mandatory for Haryana Candidates Only) NATIONALITY RELIGION ANTI-RAGGING UNDERTAKING REF. NO. BLOOD GROUP WHETHER PWD (Yes/No) If PWD Candidate - Mention the disability. Blindness and Low Vision Deaf and Hard of Hearing Locomotor Disability including Cerebral Palsy, Leprosy Cured, Dwarfism, Acid Attack Victims Muscular Dystrophy Autism, Intellectual Disability, Specific Learning Disability, and Mental Illness		



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CATEGORY		CATEGORY (Mark √)	ALLOTTED CATEGORY (Mark√)
UR-AIC	Unreserved – All India Category		
SC-AIC	Scheduled Cast – All India Category		
OBC-AIC	Other Backward Class – All India Category		
EWS-AIC	Economically Weaker Section – All India Category		
ST-AIC	Scheduled Tribe – All India Category		
WLRGEC	Ward of Land Owners whose land has been acquired under land acquisition policy for Rajiv Gandhi Education City, Sonepat		
UR-HR	Unreserved		
SC-HR	Scheduled Cast – Haryana Resident		
DSC-HR	Scheduled Cast- Haryana Resident		
BCA-HR	Backward Class Block'A'- Haryana Resident		
BCB-HR	Backward Class Block'B' – Haryana Resident		
EWS-HR	Economically Weaker Section- Haryana Resident		

QUALIFICATION:

S.	EXAM	YEAR OF	NAME	OF	THE	MARKS	MAX.	PERCENTAGE
NO.	PASSED	PASSING	BOARD/U	NIVERSIT	Υ	OBTAINED	MARKS	
1	10 th							
2	12th							
3.	Law Degree Name							

	FATHER'S DETAILS	MOTHER'S DETAILS
NAME		
OCCUPATION		
MOBILE NO.		
EMAIL-ID		
POSTAL A	DDRESS	
PERMANEN	Γ ADDRESS	



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GUARDIAN DETAILS (Emergency contact other than parents residing near Sonepat)			
NAME			
OCCUPATION			
MOBILE NO.			
EMAIL-ID			
ADDRESS			

DECLARATION BY THE CANDIDATE

I	. Son/Daughter/TG of	Sh
hereby declare that:		

- 1. I have never been punished for misbehavior, or for using unfair means in an educational institution, or debarred from taking admission in any Institution in the country.
- 2. I have submitted an anti-ragging Undertaking at UGC anti-ragging Portal (https://antiragging.in/affidavit university form.php) and I have gone through and fully understood the provisions of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009.
- 3. I Shall abide by the University Code of Ethics & Conduct, rules and regulations of the University.
- 4. I have never been charged for any illegal/criminal activity.
- 5. I am not suffering from any disease/disorder.
- 6. I shall pay all fees/ charges etc. which DBRANLU may levy from time to time.

The information given by me in the admission form and in the documents attached herewith are true to the best of my knowledge and belief, and no relevant information relating thereto has been concealed. I understand and submit that if any of the above mentioned information is found to be incorrect and if I violate any of



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the rules/regulations, University shall take punitive/remedial action against me including the cancellation of my admission.

PLACE:
DATE:
SIGNATURE OF THE STUDENT
I Father/Mother of
hereby declare that the particulars furnished by my ward in this application form are correct
to best of my knowledge.

SIGNATURE OF PARENTS/GUARDIAN



3.

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	<u>CHE</u>	CKLIST OF DOCUMENTS ATTACHED		
NAME				
ALL INDIA CLAT RANK				
ADMIT	CARD NUMBER			
SEAT A	LLOTTED CATEGORY			
S. No.		PARTICULAR	YES	NO
1	ADMISSION FORM AND	CHECKLIST OF THE DOCUMENTS		
2	SIX PASSPORT SIZE PHO	OTOGRAPHS (Colored) – MANDATORY		
3	AADHAAR CARD COPY	- MANDATORY		
4	PROOF OF DATE OF BIF STANDARD – MANDAT	TTH and MARKS STATEMENT OF 10 TH ORY		
5	DETAILS MARKS CARD MANDATORY	CERTIFICATE OF 10+2 STANDARD OR EQUIVALENT -		
6	DETAILED MARKS CAR	D CERTIFICATE OF LAW DEGREE - MANDATORY		
7	CLAT ADMIT CARD – MANDATORY			
8	CLAT SCORE CARD - MANDATORY			
9	CHARACTER CERTIFICATE ISSUED WITHIN LAST 6 MONTHS (IN ORIGINAL)			
10	MIGRATION CERTIFICATE (IN ORIGINAL)			
11	CATEGORY CERTIFICATE (FOR SC/ DSC/ ST/ OBC/ BC-A/ BC-B / PWD/EWS/WL-RGEC etc.), IF APPLIED AND ALLOTTED UNDER RESERVED CATEGORY- MANDATORY if applicable CATEGORY CERTIFICATE OF CURRENT FINANCIAL YEAR IN CASE OF BACKWARD CLASS AND EWS.			
12	HARYANA DOMICILE/ RESIDENCE CERTIFICATE, IF APPLIED AND ALLOTTED UNDER HARYANA DOMICILE/ RESIDENT CATEGORY - MANDATORY if applicable			
13	PARIVAR PEHCHAN I	PATRA - MANDATORY if applicable		
14	GAP YEAR AFFIDAVIT, I	F ANY (IN ORIGINAL)		
15	FEE RECEIPT - MANDA	TORY		
16	SIGNED ANTI-RAGGING	UNDERTAKING DOWNLOADED FROM UGC PORTAL		
17	UNDERTAKING FOR SH	ORTFALL DOCUMENTS, IF ANY.		
lote:	Submit any other	supporting document to claim your seat.		
ist of P	ending Document			
1.		4		
2.		5		••••

SIGNATURE OF THE CANDIDATE