

Form Type: A (61)

# DARUL HUDA COMMON ADMISSION TEST

## DAT INSTITUTION DETAILS

Date:.....

Name of UG:.....

Place:..... District:.....

Phone No..... Email:.....

Name of DAT Coordinator of Institution:.....

Mobile No. 1:..... Mobile No. 2:.....

Email:..... Whatsapp No:.....

Designation:..... Signature:.....

Maximum Number of Secondary First Year Admission Seats for the next year:

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Number of Students already enrolled to the Secondary first year by reappearance, etc.:.....

Number of Divisions for the Secondary first year batch:.....

Is seat reservation required as per the guide lines of the UG Management and Senate (Yes / No):.....  
[Only 10% of the total seats would be reserved for same district (Non Malappuram UGs)]

Is your Institution ready to be the DAT Exam centre this year (Yes / No):.....

If yes,

Maximum seating capacity for the entrance exam (tick):

100	150	200	250	300

Anything more:.....

Authorization on behalf of Management:

Name:.....

Designation:.....

Sign&Date:.....

Authorization by Principal:

Name:.....

Sign&Date:.....

*Seal of the Institution*

1. This form must be printed on your official letter pad and submit at the concerned office after filling the whole.
2. Further communication will be through the DAT coordinator in your institution. The whole informations through the coordinator are considered as official.