



ST. XAVIER'S UNIVERSITY
NEW TOWN
KOLKATA-700156

SPONSORSHIP FORM FOR ADMISSION
[INDIVIDUAL SPONSOR]

CANDIDATE DETAILS		
Name of the Candidate:		
Course Applied for:		
Applicant's Registration No:	Application Code:	
SPONSOR DETAILS		
Name of the Sponsor:		
Address (Residence):	Address (Office):	
	Designation:	
Phone (Residence):	Phone: (Office):	Mobile:
e-mail ID:		
Relationship with the candidate:		
Purpose of Sponsorship:		

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief, and I agree to abide by the decision of the University authorities.

Signature

Date: