



MAHARISHI MARKANDESHWAR UNIVERSITY
Sadopur (Ambala) - 134007, Haryana (India)

Ph: 0171-3041513

BUS PASS REGISTRATION FORM FOR STUDENT

1. NAME OF THE STUDENT: _____
2. FATHER NAME: _____
3. BRANCH/COURSE: _____
4. SEMESTER: _____
5. ROLL NO: _____
6. PERMANENT ADDRESS: _____

7. MOBILE NO: _____
8. PRESENT ADDRESS: _____

9. IN CASE OF EMERGENCY:-
CONTACT PERSON NAME: _____
MOBILE NO: _____ PHONE NO: _____

Paste your
recent
Passport size
photograph

Bus service required from (Tick only one)

S.N	STOPPAGE	S.N	STOPPAGE	S.N	STOPPAGE
1	CHANDIGARH	10	BALLANA	20	DOSARKA
2	PANCHKULA	11	AMBALA CITY	21	MULLANA
3	ZIRAKPUR	13	KURUKSHETRA	22	AMBALA CANTT
4	DERABASSI	14	KHANPUR	23	LADWA
5	DAPPAR	15	SAHABAD	24	KARNAL
6	LALRU	16	MOHRA-MOHRI	25	
7	ISMAILABAD	17	AMBALA CANTT	26	
8	THOL	18	BALDEV NAGAR	27	
9	NAGGALJANSUI	19	JAGADHARI		

(Signature of Student)

(For Accounts office use only)

DATE	FEE AMOUNT (RS.)	AMOUNT RECEIVED (RS.)	RECEIPT NO

Dated:

Accountant Signature

(For Transport Office use only)

DATE	BUS ROUTE NO	BUS NO	SEAT NO	BUS PASS VALIDITY (FROM -TO)

BUS PASS ISSUED BY (Signature with Date)	BUS PASS RECEIVED BY (Signature With Date)

(Transport In-Charge Signature)