Form Type: A(11)	**DARUL HUDA ISLAMIC UNIVERSITY** **UG COLLEGE DETAILS**		
Name of Institution:			
Run by:			
Full Address:			
Phone No.		Email id:	

DETAILS OF AUTHORITY

	Name	Place	Mobile No.	Email id
Principal				
Vice Principal				
Secretery				
ACP				
Staff Secretery				
Exam coordinator				
Manager/Office Secreter				
Library in charge				

STAFF DETAILS

NAME	ADDRESS	Salary	Batch No	Mobile No.	Email id	Extra duties	No.Periods

DETAILS OF STUDENTS

Secondary					S.Secondary		Degree		
Std-I	Std-II	Std-III	Std-IV	Std-V	Std-VI	Std-VII	Std-VIII	Std-IX	Std-X
0					0		0		
0									

STUDENTS' UNION

	Name	Place	Mobile No.	Email id
NAME of Union			*Authorised teacher's Mob No.*	
PRESIDENT				
SECRETARY				
TREASURER				
PRO				

NB: Don't type in shaded cells or regions

Pls send the filled up copy of this sheets to academic@dhiu.in **on or before ……**