

APPLICATION FORM FOR ADMISSION

Please affix your recent photograph here

(This form should be filled up by the Candidate in his/her own handwriting)

Course Applied For :

Academic Session :

1. Name of Candidate in CAPITAL Letters
2. Father's Name in CAPITAL Letters
3. Mother's Name in CAPITAL Letters
4. Local Guardian's Name in CAPITAL Letters
5. Postal Address in CAPITAL Letters (Please enclose proof of address)

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
PIN-	<input type="text"/>

6. Telephone / Fax / E-mail :
7. Sex :

M	/	F
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8. Date of Birth :
9. Identification Mark (If any) :
10. SC/ST/OBC/PH/BPL :
(Please attach attested supporting documents)
11. Blood Group :
12. Educational Qualifications :
(Please attach attested supporting documents)

Sl. No.	Name of the Examination	Board / University	Year of passing	Discipline / Stream	Marks / Obtained	Division / Class / Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I do hereby declare that the above informations are true and correct. I will abide by all the rules & regulations of the Institute.

Signature of Guardian

Signature of Student