

5. Permanent Address

Pin code

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6. Sex

Male	Female
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(select by a tick 'V')

7.a. Date of Birth

D	D	M	M	Y	Y	Y	Y

7.b. Age (as on 1st July):

8. Mother tongue:

9. Nationality:

10. Blood group

11. Place of birth:

12.a. Religion:

12.b. Community

OC	BC	DNC	MBC	SC	ST
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(select by a tick 'V')

13. Occupation of Parent/Guardian:

Mobile			
Phone			

14. Details of Schooling (HSC / Diploma / College)

S.No	Name and Address of School / Institute / College	HSC / Diploma / Degree	Year of Passing	Marks (Total)

15.a. Marks in Qualifying Examination

ACADEMIC	VOCATIONAL	DIPLOMA
Biology(%): Phy/Chem(%): Overall Marks(%):	Biology(%): Vocational(%): (subjects) Overall Marks(%):	Pre final Mark(%): Final mark(%): V & VI Marks(%):

15.b. Are you a registered traditional medical practitioner :

Yes	No
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(select by a tick 'V')

If Yes, then kindly enclose the details.

15.c.DEGREE

Examination passed	Reg.No., Month & Year Passing	Subject	Percentage of Marks	Name of the University / Board

Note: Attested Xerox copy of Mark Sheet Should be enclosed.

16.Extra Curricular Activities

S.No	Activity	Details

17.if you have any traditional family background add details:

Signature of Parent / Guardian

Signature of Applicant

For office use only

Defects / Incomplete particulars if any

Eligible	Not Eligible
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Signature of the Verifying Officer

JOINT DECLARATION BY THE APPLICANT AND PARENT

I / We here by solemnly and sincerely affirm that

1. The statements made and the information furnished by me in the application as also in the enclosure submitted by me are true. Should it however, be found that any information furnished there is false in material particulars on verification at a later stage, I am liable criminal prosecution and I should forego my seat in this institution and my name removed from the rolls of the institution at whatever stage of study I may be, at the time of detection of such wrong particulars.
2. My Son / Daughter / Ward should conform strictly to all the rules and regulations in force now or which may be introduced in the institution hereafter and that I realized that breach of discipline and rules on my son's / daughter's / ward's part would entail summary forfeiture of his / her seat in the institution.
3. I am aware that if my son / daughter / ward dose not put in a minimum of 90% attendance during the final examination in classes individually my son / daughter / ward will not be permitted for the examinations.
4. We understand that fees once paid will not be refunded.

Place:

Date:

Signature of the Applicant

Signature of the Parent / Guardian

Note: The Guardian can execute the above declaration only if both parents are not alive