



**Raja Peary Mohan College**  
1, Acharya Dhruva Pal Road, Hoogly, Uttarpara Kotrung, West Bengal 712258  
Tel No-033 2663 0881/0191

**Provisional Admission Form for 1st year, Session 2017-18**

Appl Form No: **RPM21710770**

Name of the Applicant: **RANAJIT SHAW**

Caste: General Gender: Male

Physically Challenged: No

Stream: **Commerce**

Category: **General**

**BCOM - GENL**

**Merit Point: 246**



Date of Birth: 02/05/00

Religion: Hindu

Nationality: Indian

Blood Group: AB+

Aadhar Card No: 396189387698

Father: RANJAN SHAW

Mother: RAMA SHAW

Guardian: RANJAN SHAW

Annual Income: 5000

Occupation of Guardian: JOB

Ration Card Category: APL

Permanent Address:  
ABHOYNAGAR BALLY HOWRAH

Residential Address :  
ABHOYNAGAR BALLY HOWRAH

email: RANAJITSHAW2017@GMAIL.COM Phone: 8017532960

Guardian: 8017532960

Rly Concession: No

Nearby Rly Stn: BELANAGAR NSS: Yes

**Your Qualifying Examination Details**

HS Exam Name: Higher Secondary

Year of Pass: 2017

Board/ Council: West Bengal Council Of Higher Secondary Education

Roll No: 4202111398

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	40	40.00	Bengali	100	54	54.00
Accountancy	100	73	73.00	Business Studies	100	50	50.00
Commercial Law and Auditing	100	66	66.00	Costing and Taxation (CSTX)	100	53	53.00

**DECLARATION OF THE APPLICANT**

- (a) All the statements in the application are true and correct. If any of those found to be not true or if it appears that (in the opinion of the college) I have in any way contravened the provision of the College and Regulations, my admission will be liable to be cancelled
- (b) If I fail to attend the college within ten days of the date of commencement of classes without satisfactory ground and proper information, the college will have every right to strike off my name from the college attendance registers for the students.
- (c) I also vow to attend 75% of the total classes in each subject as per University norms.

**DECLARATION OF THE GUARDIAN**

I shall be prepared to remove my ward from the college whenever the College Authority considers it necessary in the interest of discipline of general welfare of the institution. Further, I give the assurance that my ward will obey the rules and regulations framed by the College Authority from time to time.

Signature of the Guardian with date

Signature of the Applicant with date

For Office Use Only			
Roll No:	Section:	Ackd No:	Student Id No:
Order of Principal		Verified By	Date

**Make a fresh submission in case of errors. Use the Challan having form no of the correct application**