
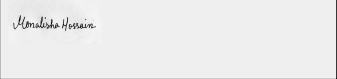




Raja Peary Mohan College
1, Acharya Dhruva Pal Road, Hoogly, Uttarpara Kotrung, West Bengal 712258
Tel No-033 2663 0881/0191

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

Appl Form No: RPM21710842	Name of the Applicant: MONALISHA HOSSAIN		
Caste: General	Gender: Female	Physically Challenged: No	
Stream: Science	Category: General		
Botany (G)-Zoology (G)-Chemistry (G)		Merit Point: 301	
Date of Birth: 30/01/99	Religion: Islam	Nationality: Indian	

Blood Group: AB+	Aadhar Card No: 255737269367		
Father: MASOOD HOSSAIN	Mother: ASIFA KHATUN	Guardian: ASIFA KHATUN	
Annual Income: 36000	Occupation of Guardian: Self Employed	Ration Card Category: APL	

Permanent Address: 4/A ABUL KALAM AZAD ROAD, P.O. - KONNAGAR, DIST - HOOGHLY, PIN - 712235	Residential Address : 4/A ABUL KALAM AZAD ROAD, P.O. - KONNAGAR, DIST - HOOGHLY, PIN - 712235
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email:	Phone: 8622001258	Guardian: 8622001258
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Rly Concession: Yes Nearby Rly Stn: KONNAGAR NSS: No

Your Qualifying Examination Details

HS Exam Name: Higher Secondary Year of Pass: 2017
Board/ Council: West Bengal Council Of Higher Secondary Education Roll No: 211721 1023

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	83	83.00	Bengali	100	80	80.00
Biology	100	75	75.00	Chemistry	100	63	63.00
Physics	100	50	50.00	Mathematics	100	33	33.00

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

Roll No:	Section:	For Office Use Only	Student Id No:
		Ackd 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