

**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 2017-18Appl 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

Monalisha Hossain

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 - 712235Residential Address :
4/A ABUL KALAM AZAD ROAD, P.O. - KONNAGAR,
DIST - HOOGHLY, PIN - 712235

email:

Phone: 8622001258

Guardian: 8622001258

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

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