



**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: **RPM21710852**

Name of the Applicant: **ANKIT SHAHA**

Caste: OBC-A Gender: Male

Physically Challenged: No



Stream: **Commerce**

Category: **General**

**BCOM - GENL**

**Merit Point: 245**

Date of Birth: 24/07/98

Religion: Hindu

Nationality: Indian

Ankit Shaha

Blood Group: B+

Aadhar Card No: 652028945107

Father: ASHIT SHAHA

Mother: JYOTIRMAYEE SHAHA

Guardian: ASHIT SHAHA

Annual Income: 120000

Occupation of Guardian: Business

Ration Card Category: APL

Permanent Address:  
26/1, G.T. ROAD, CHAMPDANI, POST-  
BAIDYABATI, DIST-HOOGHLY

Residential Address :  
26/1, G.T. ROAD, CHAMPDANI, POST-  
BAIDYABATI, DIST-HOOGHLY

email: ankitjaiswal8013@gmail.com

Phone: 8013088871

Guardian: 8013088871

Rly Concession: Yes

Nearby Rly Stn: BAIDYABATI

NSS: No

**Your Qualifying Examination Details**

HS Exam Name: ISC

Year of Pass: 2017

Board/ Council: Council For The Indian School Certificate Examinations

Roll No: 5951180

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	76	76.00	Bengali	100	50	50.00
Economics	100	48	48.00	Commerce	100	57	57.00
Accounts	100	62	62.00	Mathematics	100	43	43.00

**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**