



## 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: **RPM21710863**

Name of the Applicant: **AGNISEKHAR GHOSH**

Caste: General Gender: Male

Physically Challenged: No



Stream: **Arts**

Category: **General**

**Political Science (G)-English (G)-History Merit Point:320 (G)**

Date of Birth: 24/08/98

Religion:-

Nationality: Indian

*Agnisekhar Ghosh*

Blood Group:

Aadhar Card No:

Father: SUBIR GHOSH

Mother: LALIYA GHOSH

Guardian: SUBIR GHOSH

Annual Income: 120000

Occupation of Guardian:

Ration Card Category: APL

Permanent Address:  
191/428/1 PEARAPUR ROAD, SHEORAPHULI,  
HOOGHLY

Residential Address :  
191/428/1 PEARAPUR ROAD, SHEORAPHULI,  
HOOGHLY

email:

Phone: 9007787300

Guardian: 9007787300

Rly Concession: No

Nearby Rly Stn:

NSS: No

#### Your Qualifying Examination Details

HS Exam Name: Others

Year of Pass: 2017

Board/ Council: Central Board Of Secondary Education

Roll No: 6617823

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	82	82.00	Bengali	100	54	54.00
Political Science	100	85	85.00	Home Science	100	91	91.00
Geography	100	62	62.00	Physical Education	100	52	52.00

#### 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**