Raja Peary Mohan College
1, Acharya Dhruba 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: **RPM21710997**	Name of the Applicant:**SK AFRIDI**

Caste:General   Gender:Male

Physically Challenged: No

Stream: **Commerce**

Category: **General**

BCOM - GENL

Merit Point:256

Date of Birth: 20/09/98

Religion:Islam

Nationality:Indian

SK.Afridi

Blood Group:

Aadhar Card No:

Father: SK AIJUDDIN

Mother: NASIMA BEGUM

Guardian: SK AIJUDDIN

Annual Income: 60000

Occupation of Guardian:

Ration Card Category: APL

Permanent Address: MONOHARPUR, SK PARA, DANKUNI, HOOGHLY,712311	Residential Address : MONOHARPUR, SK PARA, DANKUNI, HOOGHLY,712311

email:

Phone: 8013720462

Guardian: 8013720462

Rly Concession: No   Nearby Rly Stn: NSS: No

Your Qualifying Examination Details

HS Exam Name: -

Year of Pass: 2017

Board/ Council: West Bengal Council Of Higher Secondary Education

Roll No: 2105111105

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	70	70.00	Bengali	100	50	50.00
Accountancy	100	53	53.00	Business Studies	100	50	50.00
Commercial Law and Auditing	100	63	63.00	Costing and Taxation (CSTX)	100	70	70.00

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