





**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: <b>RPM21711103</b>	Name of the Applicant: <b>TRINOY MUNSHI</b>
Caste: General Gender: Male	Physically Challenged: No
Stream: <b>Commerce</b>	Category: <b>General</b>
<b>BCOM - GENL</b>	<b>Merit Point: 334</b>



Date of Birth: 08/01/00	Religion: Hindu	Nationality: Indian	
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Blood Group: B+	Aadhar Card No: 738025888878	
Father: TILACK MUNSHI	Mother: GAYATRI MUNSHI	Guardian: TILACK MUNSHI
Annual Income: 60000	Occupation of Guardian: BUSINESS	Ration Card Category: APL

Permanent Address: VILL & PO JANAI, PS CHANDITALA, DIST HOOGHLY, PIN 712304	Residential Address : VILL & PO JANAI, PS CHANDITALA, DIST HOOGHLY, PIN 712304
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email:	Phone: 9051763983	Guardian: 9051763983
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Rly Concession: Yes	Nearby Rly Stn: JANAI ROAD	NSS: No
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**Your Qualifying Examination Details**

HS Exam Name: Higher Secondary	Year of Pass: 2016
Board/ Council: West Bengal Council Of Higher Secondary Education	Roll No: 2105111402

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	81	81.00	Bengali	100	80	80.00
Accountancy	100	78	78.00	Business Studies	100	85	85.00
Costing and Taxation (CSTX)	100	88	88.00		0	0	

**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:	<b>For Office Use Only</b>	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**