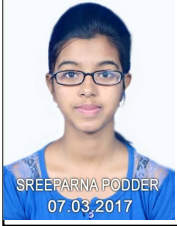




Raja Peary Mohan College
1, Acharya Dhruva Pal Road, Hoogly, Uttarpara Kotrung, West Bengal 712258
Tel No-033 2663 0881/0191

Provisional Admission Form for 1st year, Session 2017-18

Appl Form No: RPM21711185	Name of the Applicant: SREEPARNA PODDER		
Caste: General	Gender: Female	Physically Challenged: No	
Stream: Science	Category: General		
Physiology (G)-Zoology (G)-Chemistry (G)		Merit Point: 246	
Date of Birth: 06/12/99	Religion: Hindu	Nationality: Indian	

Blood Group: B+	Aadhar Card No: 563386767138		
Father: SAMBHUNATH PODDER	Mother: SWAPNA PODDER	Guardian: SAMBHUNATH PODDER	
Annual Income: 200000	Occupation of Guardian: Business	Ration Card Category: APL	

Permanent Address: 369/63, RAMMOHAN SARANI(MALIR BAGAN), BAIDYABATI, HOOGHLY, 712222	Residential Address : 369/63, RAMMOHAN SARANI(MALIR BAGAN), BAIDYABATI, HOOGHLY, 712222
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email: sreeparnacuti32@gmail.com	Phone: 9433107492	Guardian: 9433107492
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Rly Concession: Yes	Nearby Rly Stn: BAIDYABATI	NSS: No
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Your Qualifying Examination Details

HS Exam Name: Higher Secondary	Year of Pass: 2017
Board/ Council: West Bengal Council Of Higher Secondary Education	Roll No: 2125211530

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	71	71.00	Bengali	100	60	60.00
Chemistry	100	51	51.00	Mathematics	100	41	41.00
Physics	100	50	50.00	Biology	100	64	64.00

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

Roll No:	Section:	For Office Use Only	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