

**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: **RPM21711283**Name of the Applicant: **SOUVIK DAS**

Caste: General Gender: Male

Physically Challenged: No

Stream: **Arts**Category: **General****Political Science (G)-English  
(G)-Economics (G)****Merit Point: 261**

Date of Birth: 09/02/97

Religion: Hindu

Nationality: Indian

Souvik Das

Blood Group: O+

Aadhar Card No: 542848252701

Father: SAMIR KUMAR DAS

Mother: SIPRA DAS

Guardian: SAMIR KUMAR DAS

Annual Income: 70000

Occupation of Guardian: Service

Ration Card Category: APL

**Permanent Address:**  
HARIHAR NURSERY DAKSHIN RAJYADHARPUR,  
P.O. - MALLICKPARA, P.S. - SERAMPORE, DIST -  
HOOGHLY, PIN - 712203**Residential Address :**  
HARIHAR NURSERY DAKSHIN RAJYADHARPUR,  
P.O. - MALLICKPARA, P.S. - SERAMPORE, DIST -  
HOOGHLY, PIN - 712203

email: dsouvik748@gmail.com

Phone: 8481941900

Guardian: 8481941900

Rly Concession: Yes

Nearby Rly Stn: SERAMPORE NSS: No

**Your Qualifying Examination Details**

HS Exam Name: Higher Secondary

Year of Pass: 2017

Board/ Council: West Bengal Council Of Higher Secondary Education

Roll No: 2110111004

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	61	61.00	Bengali	100	73	73.00
Biology	100	61	61.00	Mathematics	100	42	42.00
Chemistry	100	32	32.00	Environment al Science	100	66	66.00

**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**