



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: RPM21711296		Name of the Applicant: SAMRAT MUKHERJEE	
Caste: General	Gender: Male	Physically Challenged: No	
Stream: Commerce		Category: General	
BCOM - GENL		Merit Point: 231	
Date of Birth: 05/05/00	Religion: Hindu	Nationality: Indian	

Blood Group:	Aadhar Card No: 360622627744		
Father: DEBASISH MUKHERJEE	Mother: KRISHNA MUKHERJEE	Guardian: DEBASISH MUKHERJEE	
Annual Income: 72000	Occupation of Guardian: Service	Ration Card Category: APL	
Permanent Address: 109/2 udaygarh liluah howrah 711203		Residential Address : 109/2 udaygarh liluah howrah 711203	
email: Mukherjeesamrat10@gmail.co		Phone: 9143210017	Guardian: 9143210017
m			

Rly Concession: No Nearby Rly Stn: Liluah 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: 4219111237

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	42	42.00	Bengali	100	63	63.00
Accountancy	100	40	40.00	Business Studies	100	73	73.00
Commercial Law and Auditing	100	37	37.00	Costing and Taxation (CSTX)	100	53	53.00

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