
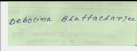


**Raja Peary Mohan College**

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: RPM21711312	Name of the Applicant: DEBOLINA BHATTACHARJEE		
Caste: General	Gender: Female	Physically Challenged: No	
Stream: Science	Category: General		
Botany (G)-Zoology (G)-Chemistry (G)		Merit Point: 273	
Date of Birth: 21/05/97	Religion: Hindu	Nationality: Indian	

Blood Group: O+	Aadhar Card No: 757410873422	
Father: SALIL BHATTACHARJEE	Mother: BAI SAKHI BHATTACHARJEE	Guardian: SALIL BHATTACHARJEE

Annual Income: 80000 Occupation of Guardian: Business Ration Card Category: APL

Permanent Address: VILL-PAIRAGACHA, PO-JANAI, DIST- HOOGHLY, PIN-712304	Residential Address : VILL-PAIRAGACHA, PO-JANAI, DIST- HOOGHLY, PIN-712304
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email: mamonbidu@gmail.com Phone: 7059692363 Guardian: 7059692363

Rly Concession: Yes Nearby Rly Stn: GOBRA NSS: No

Your Qualifying Examination DetailsHS Exam Name: Higher Secondary Year of Pass: 2015
Board/ Council: West Bengal Council Of Higher Secondary Education Roll No: 210521-1565

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	67	67.00	Bengali	100	80	80.00
Chemistry	100	58	58.00	Mathematics	100	50	50.00
Physics	100	57	57.00	Biology	100	68	68.00

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