





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: RPM21711324	Name of the Applicant: SUKANTA MONDAL		
Caste: SC	Gender: Male	Physically Challenged: No	
Stream: Arts	Category: General		
Political Science (G)-History (G)-Philosophy (G)	Merit Point: 268		
Date of Birth: 09/09/99	Religion: Hindu	Nationality: Indian	

Blood Group: B+	Aadhar Card No: 616384160934		
Father: ABHIJIT MONDAL	Mother: SUBHADRA MONDAL	Guardian: ABHIJIT MONDAL	
Annual Income: 60000	Occupation of Guardian: Service	Ration Card Category: APL	
Permanent Address: 244 G.T.ROAD , BIRAJKUTHIR, BAIDYABATI		Residential Address : 244 G.T.ROAD , BIRAJKUTHIR, BAIDYABATI	
email: sukantamondal537@gmail.com		Phone: 9062507284	Guardian: 9062507284

Rly Concession: Yes Nearby Rly Stn: BAIDYABATI 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: 2142111085

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	80	80.00	Bengali	100	81	81.00
Chemistry	100	50	50.00	Mathematics	100	43	43.00
Physics	100	53	53.00	Biology	100	54	54.00

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