



**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: <b>RPM21711366</b>		Name of the Applicant: <b>BAIDYA NATH HATI</b>	
Caste: General	Gender: Male	Physically Challenged: No	<b>No Photo Available</b>
Stream: <b>Science</b>	Category: <b>General</b>		
<b>Botany (G)-Zoology (G)-Physiology (G) Merit Point:277</b>			

Date of Birth: 28/04/99	Religion: Hindu	Nationality: Indian	<b>No Photo Available</b>
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Blood Group: O+	Aadhar Card No:	
Father: PANCHU GOPAL HATI	Mother: SHYAMALI HATI	Guardian: PANCHU GOPAL HATI
Annual Income: 50000	Occupation of Guardian: BUSINESS	Ration Card Category: BPL

Permanent Address: SHANPUKUR DHAR, CHARABAGAN, SHEORAPHULY	Residential Address : SHANPUKUR DHAR, CHARABAGAN, SHEORAPHULY
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email:	Phone: 8622806674	Guardian: 8622806674
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Rly Concession: No	Nearby Rly Stn: SHEORAPHULY	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: 212511297

Subject Name	Full Marks	Marks Obtained	%	Subject Name	Full Marks	Marks Obtained	%
English	100	76	76.00	Bengali	100	74	74.00
Biology	100	70	70.00	Mathematics	100	52	52.00
Physics	100	57	57.00	Chemistry	100	48	48.00

**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

<b>For Office Use Only</b>			
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**