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Passport Photo

ADMISSION FORM

Name: M / F SI.No.:
Father's Name:
Mother's Name:
Course applied:
Name of College/ University:
Subject applied:

Age:
D.O.B.
Caste:

Qualification	Year of Passing	Board/ University	School/ College	Subjects	Marks/ T. Marks	%
10th						
12th						
Graduate						
Post Graduate						
Any Other						

Place:

Date:

Signature of Student

Admitted

Signature of Admission In Charge

CONTACT DETAILS

Address:

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Contact No.

Email Id.: