



مولانا مظہر الحق عربی و فارسی یونیورسٹی، پٹنہ

MAULANA MAZHARUL HAQUE ARABIC & PERSIAN UNIVERSITY, PATNA

For Office use only

SID No.

Reg.No.

Joint Entrance Test Roll No.....

Marks Obtained

(Attach attested Copy of Admit Card & downloaded Score Card)

Institution Code: Session Form No.

College Name:

REGISTRATION FORM FOR BACHELOR OF EDUCATION (B.Ed.)

Note: All Columns must be filled in own handwriting by the student otherwise the application will be rejected

To

The Registrar

M. M. H. Arabic & Persian University, Patna

Sir,

I have to request you to kindly register me for the Bachelor of Education (B.Ed.)
Course, Session..... I am furnishing below the information:

Recent
photograph of the
candidate attested
by
Principal / Director

Signature of the Candidate

1. Name of the Candidate:

a) Devnagri b) Urdu

c) Roman Script (BLOCK LETTERS, leave one blank space between First, Second and Third Name)

2. Father's Name in BLOCK LETTERS only

3. Mother's Name in BLOCK LETTERS only

4. Date of Birth: ___ / ___ / _____ 5. Gender (Tick the appropriate Box) Male Female Other

6. Religion: 7. Marital Status: Married Unmarried Other

8. Category: General SC ST OBC Handicapped Other 9. Blood Group

10. Family Income: 11. Background: Urban Rural

12. Nationality: Indian NRI Foreigner Specify Name of the Country

13. Mark of identification:

14. Mob./Tel No. 15. email id:

16. Permanent Address:

.....

..... Dist. StatePin:

17. Address for Correspondence:

.....

..... Dist. State Pin:

18. Aadhar No. (Attach attested Copy of Aadhar)

19. Date of Admission: ___ / ___ / _____ 20. Class Roll No. ___ / ___ / _____

21. Subjects Offered: Method one
 Method Two
 Craft

22. Educational Qualification (Attach attested photostate copy)

Name of the Examination Passed	Div. / Class awarded	% of Marks	Year of Passing	Examination Roll No.	Name of the College / School	Name of the Board / University
Matriculation						
Intermediate						
Graduation						
Post Graduation						

23. Migration Details: (Only for those students, who migrated from other University, Attach original Migration Certificate and attested copy of CLC)

Migration Certificate No.	Date of Issue	Date of Exam. Pass	CLC No.	Name of the College / University

24. Registration No. (If already registered with this University)

Name of the Course	Year of the Registration	Registration No.

I S/o. hereby declare that the information furnished as above are true. In the event of any information being found incorrect or misleading, my candidature shall be liable to be cancelled by the University at any time and I shall not be entitled to refund of any types of fee paid by me to the University. I shall declare that I have not taken admission simultaneously in any other course during the same session run by this or in any other University.

Place: _____

Signature of the Candidate

Date: ___ / ___ / _____

25. Forwarded to University for Registration of S/o. with NOC.

Full Signature with Seal, College Code & Name