

3.5x4.5cm
Photograph

ADMISSION FORM

Course applied for

Applicant's Name

Parent's/Guardian's Name

Permanent Address

Present Address

Contact Number

In Emergency Contact

Email

Date of Birth

Educational Qualification

Examination	Institution/Board/University	Year	Marks (%)

Declaration

I hereby declare that the information above and documents submitted herewith are authentic. Moreover, I shall be legally and morally responsible for any kind of unethical conduct or behaviour during the course period.

Applicant's Signature & Date

* Admission Form Fee of ₹ 200.00 (Rupees Two Hundred) only, to be paid at the time of submission