

Chanchal College

Chanchal, Malda, W.B. Affiliated By University of Gour Banga

Application For	rm No : CC2000430	Name of the App	licant :				
Application Sta	atus :	Phase :					
For Office Use Only							
Roll No:	Section:	Ackd No:	Student Id No:				
Order of Princi	ipal	Verified By	Date				
PWD:		Mobile: Date of	Birth:				
Blood Group:	Blood Group: Adhar: Sport: EWS:						
Application Status							
Streams	Types	Combination	Ме	rit			
Father:		Mother:	Guardian Name:				
Annual Income: Guardian's Occupation: Guardian Phone:							
Residential Ac	ddress: Block: Dist: S	State:					
Email:		NCC:	NSS:				
		Your Qualifying Examination Detail	ls				
	Stream, II Vear of Bassir	~~.					

Roll No: || HS Stream: || Year of Passing:

Board/ Council:

Subjects Name	Full Marks	% scored
Grand % =	Grand Total =	

DECLARATION OF THE APPLICANT

I hereby declare that all information provided herewith is correct to the best of my knowledge. My application is liable to be cancelled if, at any stage of the admission process, if any of the information provided is found to be at variance with original documents. I shall produce all the original documents at the time of admission.

Signature of the Applicant with date

Signature of the Guardian with date

Printed on 2024-04-25 20:17:08

	Chanchal College				
	Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy				
	Four Ma				
Application id: CC2000430 Applicants Name:	Form No.: Fathers Name:				
Honours Combination:	<u>.</u>				
General Combination:					
Registration Form No.:	Registration Form Submitted On:				
Allotted Roll No.:					
	Chanchal College				
Chanchal, Malda, W.B. Form Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)					
Application id: CC2000430	Form No.:				
Applicants Name:	Fathers Name:				
Honours Combination:					
General Combination:					
Registration Form No.:	Verified by:				
Allotted Roll No.:					