PROVISIONAL ADMISSION FOR FIRST YEAR, SESSION 2023-24



Chanchal College

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

Application Forr	n No : CC2000439	Name of the Applic	ant:
Application Stat	us:	Phase :	
		For Office Use Only	
Roll No:	Section:	Ackd No:	Student Id No:
Order of Princip	pal	Verified By	Date
PWD:		Mobile: Date of B	irth:
	Adhar: Sport: EWS:		
		Application Status	
Streams	Types	Combination	Merit
Streams Father:	Types	Combination Mother:	Merit Guardian Name:
Father:	Types Guardian's Occupation	Mother:	
Father: Annual Income:		Mother: n: Guardian Phone:	
Father: Annual Income:	Guardian's Occupation dress: Block: Dist: S	Mother: n: Guardian Phone:	
Father: Annual Income: Residential Add	Guardian's Occupation dress: Block: Dist: S	Mother: n: Guardian Phone: State:	Guardian Name: NSS:
Father: Annual Income: Residential Add Email:	Guardian's Occupation dress: Block: Dist: S	Mother: n: Guardian Phone: State: NCC: Your Qualifying Examination Details	Guardian Name: NSS:
Father: Annual Income: Residential Add Email:	Guardian's Occupation dress: Block: Dist: S	Mother: n: Guardian Phone: State: NCC: Your Qualifying Examination Details	Guardian Name: NSS:
Father: Annual Income: Residential Add Email: Roll No: HS S Board/ Council	Guardian's Occupation dress: Block: Dist: S	Mother: n: Guardian Phone: State: NCC: Your Qualifying Examination Details	Guardian Name: NSS:

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 2024-04-20 17:28:55

Chanchal College

Chanchal, Malda, W.B. (For Office Use Only) Receipt Copy Form Verification Office Copy

Application id: CC2000439	Form No.:			
Applicants Name:	Fathers Name:			
Honours Combinatio	<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: CC2000439	Form No.:			
Applicants Name:	Fathers Name:			
Honours Combinatio	<u> </u>			
General Combination				
Registration Form No.:	Verified by:			
Allotted Roll No.:				
Allotted Roll No				