

## Chanchal College

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

Application Form No : CC2000614			Name of the Applic	ant :		
Application Status :			Phase :			
		For Offi	ce Use Only			
Roll No:	Section:		Ackd No:	Student Id No	):	
Order of Princip	bal		Verified By	Date		
PWD:			Mobile:   Date of Bi	rth:		
Blood Group:    Adhar:    Sport:    EWS:						
Application Status						
Streams	Types	Comb	ination		Merit	
Father: Mother:		other:	Guardian Name:			
Annual Income:    Guardian's Occupation:    Guardian Phone:						
Residential Address:    Block:    Dist:    State:						
Email:	NCC	):		NSS:		
Your Qualifying Examination Details						

## 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 2024-04-26 04:12:23

	Chanakal Callana					
	Chanchal College					
	Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy					
Application id: CC2000614	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combinatior	·					
nonours combination						
General Combination						
Registration Form No.:	Registration Form Submitted On:					
Allotted Roll No.:						
	Chanchal College					
F	Chanchal, Malda, W.B. form Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)					
Application id: CC2000614	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combination:						
General Combination						
Registration Form No.:	Verified by:					
Allotted Roll No.:						
L						