PROVISIONAL ADMISSION FOR FIRST YEAR, SESSION 2023-24



Chanchal College

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

	m No : CC2000653	Name of the Applic	ant.		
Application Sta	tus:	Phase :			
		For Office Use Only			
Roll No:	Section:	Ackd No:	Student Id No:		
Order of Bringi	nal	Varified By	Data		
Order of Principal		Verified By	Date		
PWD:		Mobile: Date of Bi	Mobile: Date of Birth:		
Blood Group:	Adhar: Sport: EWS:				
		Application Status			
	Application Status				
	1				
Streams	T	 			
Sueams	Types	Combination	Merit		
Father:	Types	Mother:	Guardian Name:		
Father:	: Guardian's Occupation	Mother:			
Father: Annual Income	<u> </u>	Mother: n: Guardian Phone:			
Father: Annual Income	: Guardian's Occupation	Mother: n: Guardian Phone:			
Father: Annual Income Residential Ac	: Guardian's Occupation	Mother: n: Guardian Phone: State:	Guardian Name: NSS:		
Father: Annual Income Residential Ac Email:	: Guardian's Occupation	Mother: n: Guardian Phone: State: NCC: Your Qualifying Examination Details	Guardian Name: NSS:		
Father: Annual Income Residential Ac Email:	: Guardian's Occupation dress: Block: Dist: S Stream: Year of Passi	Mother: n: Guardian Phone: State: NCC: Your Qualifying Examination Details	Guardian Name: NSS:		
Father: Annual Income Residential Ac Email: Roll No: HS Board/ Counc	: Guardian's Occupation dress: Block: Dist: S Stream: Year of Passi	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 2024-04-25 07:23:21

Chanchal College

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

Application id: CC2000653	Form No.:			
Applicants Name:	Fathers Name:			
Honours Combination				
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: CC2000653	Form No.:			
Applicants Name:	Fathers Name:			
Honours Combination				
General Combination:				
Registration Form No.:	Verified by:			
Allotted Roll No.:				