

Chanchal College

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

Application For	m No : CC2001103	Name of the Ap	oplicant :				
Application Stat	tus :	Phase :					
For Office Use Only							
Roll No:	Section:	Ackd No:	Student Id No	:			
Order of Princip	pal	Verified By	Date				
PWD:		Mobile: Date c	of Birth:				
Blood Group:	Blood Group: Adhar: Sport: EWS:						
	Δ	pplication Status	c				
Ctracero c	Turner	O a making stien		N			
Streams	Types	Combination		Merit			
Father:	Мо	ther:	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 2024-04-19 04:11:38

Chanchal College					
Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy					
Form No.:					
Fathers Name:					
General Combination:					
tion Form Submitted On:					
Chanchal, Malda, W.B. Form Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)					
Form No.:					
Fathers Name:					
Honours Combination:					
General Combination:					
Verified by:					
	Chanchal, Malda, W.B. (For Office Use Only) Receipt Copy Form Verification Office Copy Form No.: Chanchal, Malda, W.B. ided - Student's Copy/Provisional Identity card (Valid upto 30.06.2023) Form No.: Fathers Name:				