

## Chanchal College

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

Application Form No : CC2001185		Nam	e of the Applicant :						
Application Stat	tus :	Pha	Phase :						
		For Office Use	Only						
Roll No:	Section:	Acko	l No:	Student Id No	:				
Order of Princip	bal	Verit	ied By	Date					
PWD:		Mob	ile:   Date of Birth:						
Blood Group:	Blood Group:    Adhar:    Sport:    EWS:								
	Application Status								
	/ \	pplication	Oldius						
Streams	Types	Combinatior			Merit				
Father: Mother:		ther:	Guardian Name:						
Annual Income:    Guardian's Occupation:    Guardian Phone:									
Residential Ad	dress:    Block:    Dist:    State:								
Email:	NCC		NS	SS:					
	You	<sup>·</sup> Qualifying Exami	nation Details						
Roll No:    HS S	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 09:39:21

Chanchal College						
	Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy					
Application id: CC2001185	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combination						
General Combination:						
Registration Form No.:	Registration Form Submitted On:					
Allotted Roll No.:						
	Chanchal College					
F	Chanchal, Malda, W.B. orm Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)					
Application id: CC2001185	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combination:						
General Combination:						
Registration Form No.:	Verified by:					
Allotted Roll No.:						
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