PROVISIONAL ADMISSION FOR FIRST YEAR, SESSION 2023-24



Chanchal College

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

Application Forr	n No : CC2001352	Name of the Appli	cant:	
Application Stat	us:	Phase :		
		For Office Use Only		
Roll No:	Section:	Ackd No:	Student Id No:	
Onder of Driveria	. = 1	Marified De	Dete	
Order of Principal		Verified By	Date	
PWD:		Mobile: Date of B	Mobile: Date of Birth:	
Blood Group:	Adhar: Sport: EWS:			
		Application Status		
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: Residential Add	Guardian's Occupation dress: Block: Dist: S	Mother: n: Guardian Phone: State:	Guardian Name:	
Father: Annual Income:	Guardian's Occupation dress: Block: Dist: S	Mother: n: Guardian Phone: State: NCC:	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	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 Stream: Year of Passin	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 19:15:24

Chanchal College

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

Application id: CC2001352	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.				
Application id: CC2001352	Form No.:			
Applicants Name:	Fathers Name:			
Honours Combination				
General Combination:				
Registration Form No.:	Verified by:			
Allotted Roll No.:				