### PROVISIONAL ADMISSION FOR FIRST YEAR, SESSION 2023-24



## **Chanchal College**

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

Application For	m No : <b>CC2001368</b>	Na	ame of the Applic	cant:	
Application State	tus:	Ph	ase:		
		For Office U	se Only		
Roll No:	Section:	Ac	kd No:	Student Id No:	
Order of Princip	pal	Ve	rified By	Date	
PWD:		Mo	obile:   Date of B	Birth:	
Blood Group:	Adhar:    Sport:    EWS:				
		Application	Status		
Streams	Types	Combination	on		Merit
Father: Mother:		Mother:	Guardian Name:		
Annual Income	:    Guardian's Occupatio	n:    Guardian Phone:			
Residential Ad	dress:    Block:    Dist:    \$	State:			
Email: NCC:		NCC:	NSS:		
		Your Qualifying Exar	nination Details	s	
Roll No:    HS	Stream:    Year of Passi	ng:			
<b>Board/ Counci</b>	l:				
Subjects Name		Full Mar	ks	% 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 17:33:03

## **Chanchal College**

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

Application id: CC2001368	Form No.:				
Applicants Name:	Fathers Name:				
<b>Honours Combination</b>	on:				
<b>General Combinatio</b>	<u>n:</u>				
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: CC2001368	Form No.:				
Applicants Name:	Fathers Name:				
Honours Combination	on:				
General Combination:					
	<del></del>				
Registration Form No.:	Verified by:				
	Verified by:				
Registration Form No.: Allotted Roll No.:	Verified by:				
	Verified by:				