PROVISIONAL ADMISSION FOR FIRST YEAR, SESSION 2023-24



Chanchal College

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

Application For	m No : CC2001665	Name of the Application	Name of the Applicant :				
Application Sta	tus:	Phase :					
For Office Use Only							
Roll No:	Section:	Ackd No:	Student Id No:				
Order of Princi	pal	Verified By	Date				
PWD:		Mobile: Date of Bi	rth:				
Blood Group: Adhar: Sport: EWS:							
Application Status							
Streams	Types	Combination	Merit				
Father:		Mother:	Guardian Name:	_			
Annual Income: Guardian's Occupation: Guardian Phone:							
Annual Income	: Guardian's Occupatio	n: Guardian Phone:					
	: Guardian's Occupatio dress: Block: Dist: \$						
			NSS:				
Residential Ad		State:					
Residential Ad Email:		State: NCC: Your Qualifying Examination Details					
Residential Ad Email:	Idress: Block: Dist: S	State: NCC: Your Qualifying Examination Details					
Residential Ad Email: Roll No: HS	Idress: Block: Dist: S	State: NCC: Your Qualifying Examination Details					

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 17:41:03

Chanchal College

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

Application id: CC2001665	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combination	<u>vn:</u>					
General Combination	<u>ı:</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: CC2001665	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combination	<u>on:</u>					
General Combination	<u>1:</u>					
Registration Form No.:	Verified by:					
Allotted Roll No.:						