

Chanchal College

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

Name of the Appl	licant :					
Phase :						
For Office Use Only						
Ackd No:	Student Id No:					
Verified By	Date					
Mobile: Date of	Birth:					
		_				
Application Status						
Combination	Merit					
Father: Mother: Guardian Name:						
Annual Income: Guardian's Occupation: Guardian Phone:						
Residential Address: Block: Dist: State:						
	NSS:					
Your Qualifying Examination Details						
	Phase : For Office Use Only Ackd No: Verified By Mobile: Date of Plication Status Combination r: rdian Phone:	For Office Use Only Student Id No: Ackd No: Date Verified By Date Mobile: Date of Birth: Mobile: Cate of Birth: Olication Status Merit combination Merit r: Guardian Name: rdian Phone: NSS:				

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 2024-04-25 21:22:45

Chanchal College				
	Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy			
Application id: CC2001689	Form No.:			
Applicants Name:	Fathers Name:			
Honours Combination:				
General Combination:				
Registration Form No.: R	egistration 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: CC2001689	Form No.:			
Applicants Name:	Fathers Name:			
Honours Combination:				
General Combination:				
Registration Form No.:	Verified by:			
Allotted Roll No.:				