PROVISIONAL ADMISSION FOR FIRST YEAR, SESSION 2023-24



Chanchal College

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

Application Form No : CC2001756			Name of the Applic	ant:		
Application Status :			Phase :			
		For Offi	ce Use Only			
Roll No:	Section: Ackd No:		Ackd No:	Student Id No:		
Onder of Drive size	1		Marifia d D.	Data		
Order of Principal			Verified By	Date		
PWD:			Mobile: Date of Bi	rth:		
Blood Group:	Adhar: Sport: EWS:					
		Applicat	tion Status			
		Applicat	liuri Status			
	1					
Streams	Types	Comb	ination		Merit	
Father:		Mother:		Guardian Name:		
Annual Income	: Guardian's Occupatio	n: Guardian Pho	ne:			
Residential Ad	dress: Block: Dist: \$	State:				
Email:		NCC:		NSS:		
		Your Qualifying	Examination Details			
Roll No: HS	Stream: Year of Passi	, ,				
Board/ Counci	**					
Subjects Name		Ful	l 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 2024-04-20 20:46:15

Chanchal College

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

Application id: CC2001756	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combination						
Honours Combination:						
General Combination:						
Registration Form No.:	Registration Form Submitted On:					
registration Form No	Registration Form Submitted On.					
Allotted Roll No.:						
	Chanchal College					
Chanchal, Malda, W.B.						
1	orm Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)					
Application id: CC2001756	Form No.:					
Applicants Name:	Fathers Name:					
Honours Combination:						
Conoral Combination						
General Combination:						
Registration Form No.:	Verified by:					
Allotted Roll No :						
Allotted Roll No.:						