

## Chanchal College

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

Application For	m No : <b>CC2001825</b>	Name of the Appl	icant :		
Application Stat	tus :	Phase :			
		For Office Use Only			
Roll No:	Section:	Ackd No:	Student Id No:		
Order of Princip	bal	Verified By	Date		
PWD:		Mobile:   Date of	Birth:		
Blood Group:	Blood Group:    Adhar:    Sport:    EWS:				
Application Status					
			J		
Streams	Types	Combination	Merit		
Father: Mother:		ther:	Guardian Name:		
Annual Income:    Guardian's Occupation:    Guardian Phone:					
Residential Address:    Block:    Dist:    State:					
Email:	NCC		NSS:		
	You	r Qualifying Examination Detai	ls		

## 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

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	Chanchal College
	Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy
Application id: CC2001825	Form No.:
Applicants Name:	Fathers Name:
Honours Combination:	
General Combination:	
Registration Form No.:	Registration Form Submitted On:
Allotted Roll No.:	
	Chanchal College
Fc	Chanchal, Malda, W.B. rm Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)
Application id: CC2001825	Form No.:
Applicants Name:	Fathers Name:
Honours Combination:	
General Combination:	
Registration Form No.:	Verified by:
Allotted Roll No.:	
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