

Chanchal College

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

Application For	m No : CC2001891	Name	e of the Applicant :						
Application Stat	tus :	Phas	e :						
For Office Use Only									
Roll No:	Section:	Ackd	No:	Student Id No:					
Order of Princip	bal	Verifi	ed By	Date					
PWD:		Mobi	le: Date of Birth:						
Blood Group: Adhar: Sport: EWS:									
	Δ	pplication	Status						
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] _]					
Streams	Types	Combination			Merit				
Father:	Мо	ther:	Guard	dian Name:					
Annual Income: Guardian's Occupation: Guardian Phone:									
Residential Address: Block: Dist: State:									
Email:	NCC		NSS:						
Your Qualifying Examination Details									
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 2024-04-20 00:27:21

	Chanchal College						
Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy							
Application id: CC2001891	Form No.:						
Applicants Name:	Fathers Name:						
Honours Combination:							
General Combination:	General Combination:						
Registration Form No.: Reg	gistration 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: CC2001891	Form No.:						
Applicants Name:	Fathers Name:						
Honours Combination:							
General Combination:							
Registration Form No.:	Verified by:						
Allotted Roll No.:							