

Chanchal College

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

Application For	m No : CC2002240	Name of the Appl	icant :				
Application Stat	tus :	Phase :					
For Office Use Only							
Roll No:	Section:	Ackd No:	Student Id No:				
Order of Princip	pal	Verified By	Date				
PWD:		Mobile: Date of I	Birth:				
Blood Group: Adhar: Sport: EWS:							
Application Status							
Streams	Types	Combination	N	lerit			
Father:	 Mc	ther:	Guardian 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 08:12:18

Chanabal Collaga					
Chanchal College Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy					
Form No.:					
Fathers Name:					
General Combination:					
tration Form Submitted On:					
Allotted Roll No.:					
Chanchal, Malda, W.B. Form Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)					
Form No.:					
Fathers Name:					
Honours Combination:					
Verified by:					
	(For Office Use Only) Receipt Copy Form Verification Office Copy Form No.: rtation Form Submitted On: Chanchal College Chanchal, Malda, W.B. rtiffed - Student's Copy/Provisional Identity card (Valid upto 30.06.2023) Form No.: Fathers Name:				