

Chanchal College

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

Application For	rm No : CC2002418	I	Name of the Appli	cant :				
Application Sta	atus :	Į	Phase :					
		For Office	Use Only					
Roll No:	Section:	ŀ	Ackd No:	Student Id No	D:			
Order of Princi	ipal	١	/erified By	Date				
PWD:			Mobile: Date of Birth:					
Blood Group:	Blood Group: Adhar: Sport: EWS:							
	Application Status							
	,	ppnoade						
Streams	Types	Combina	tion		Merit			
Father:	Mc	other:		Guardian Name:				
Annual Income: Guardian's Occupation: Guardian Phone:								
Residential Ac	ddress: 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 2024-04-26 20:34:59

	Chanchal College							
Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy								
Application id: CC2002418	Form No.:							
Applicants Name:	Fathers Name:							
Honours Combination:								
General Combination:								
Registration Form No.: Regi	istration Form Submitted On:							
Allotted Roll No.:								
	Chanchal Collogo							
	Chanchal College							
Chanchal, Malda, W.B. Form Verified - Student's Copy/Provisional Identity card (Valid upto 30.06.2023)								
Application id: CC2002418	Form No.:							
Applicants Name:	Fathers Name:							
Honours Combination:								
General Combination:								
Registration Form No.:	Verified by:							
Allotted Roll No.:								