

Chanchal College

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

Application Form No : CC2002756			Name of the Applicant :				
Application Sta	itus :		Phase :				
		Fo	or Office Use Only				
Roll No:	Se	ction:	Ackd No:	Student Id No	:		
Order of Princi	pal		Verified By	Date			
PWD:			Mobile: Date of	Birth:			
Blood Group:	Adhar: Sport:	EWS:					
Application Status							
		7.66					
Streams	Types		Combination		Merit		
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Father:		Mother:		Guardian Name:			
Annual Income	: Guardian's Oco	cupation: Guardia	n Phone:				
Residential Ac	ldress: Block: [Dist: State:					
Email:		NCC:		NSS:			
		Your Qual	ifying Examination Detai	ils			

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: CC2002756	Form No.:						
Applicants Name:	Fathers Name:						
Honours Combination:							
General Combination:	General Combination:						
Registration Form No.:	Registration 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: CC2002756	Form No.:						
Applicants Name:	Fathers Name:						
Honours Combination:							
General Combination:							
Registration Form No.:	Verified by:						
Allotted Roll No.:							
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