

Chanchal College

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

Application Form No : CC2002865			Name of the Applicant :					
Application Sta	atus :		Phase :					
		For	Office Use Only					
Roll No:	Section:		Ackd No:	Student Id No	Student Id No:			
Order of Princi	ipal		Verified By	Date				
PWD:			Mobile: Date of Bir	th:				
	Adhar: Sport: EWS:							
Application Status								
Streams	Types	Co	ombination		Merit			
Father:	ather: Mother:			Guardian Name:				
Annual Income	e: Guardian's Occupatior	: Guardian	Phone:					
Residential Ac	ddress: Block: Dist: S	tate:						
Email:		NCC:		NSS:				
		Your Qualify	ing 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 20:50:04

	Chanchal College				
	Chanchal College Chanchal, Malda, W.B. (For Office Use Only) <u>Receipt Copy Form Verification</u> Office Copy				
Application id: CC2002865	Form No.:				
Applicants Name:	Fathers Name:				
Honours Combination	<u>.</u>				
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: CC2002865	Form No.:				
Applicants Name:	Fathers Name:				
Honours Combination:					
General Combination:					
Registration Form No.:	Verified by:				
Allotted Roll No.:					