



STUDENT'S IDENTITY CARD  
JADAVPUR UNIVERSITY  
KOLKATA - 700032



NAME.....**SUBHADIP JANA**.....

DEPARTMENT.....**IEE**.....

DATE OF BIRTH.....**27/08/2003**..... BLOOD GROUP.....**A+**.....

NAME OF FATHER / MOTHER.....**SULEKHA JANA**.....

GUARDIAN'S PHONE NO. ....**8670011979**.....

*Subhadip Jana*  
**Signature of the Student**

*Dr. Prayen*  
**Registrar**  
Deputy Registrar  
Jadavpur University  
23/5/2025

EMERGENCY CONTACT NO..... 9434209434  
PERMANENT ADDRESS..... Kalindi, Mandarmoni,  
East Midnapore - 721455  
PRESENT ADDRESS..... JUSL Boys Hostel, Saltlake  
Sector-3, Kolkata- 700106, Room- N3-12  
ROLL NO. 002311102043..... DATE OF ISSUE 22/5/2025

SESSION	2023-2024	2024-25				
CLASS	UG-1	UG-2nd yr				
Signature of Issuing Staff	/	Bipradas 22/5/25				

*Lost of Card should be reported forthwith Duplicate will be issued on payment of Rs. 5/-and on production of photograph.*

**NOT TRANSFERABLE**