



Kandivli Education Society's Junior College of Arts & Commerce

(Affiliated to the Maharashtra State Board of Secondary & Higher Secondary Education)



ADMISSION FORM

FOR OFFICE USE ONLY

Quota:	Open	Receiver Sign		Date :	
Receipt No.:		Subject Combination:	IT/MATHS		

Application Form for Admission to : 12TH COMMERCE UNAIDED - 1

Academic Year : 2024-2025

To,

The Principal

I am applying for admission to **12TH COMMERCE UNAIDED - 1 IT/MATHS** for the academic year **2024-2025**

and I promise to remit the applicable fees. I give below all the particulars required.

I am aware that -

And I promise to remit the applicable fees. I give below all the particulars required.

- I will not be allowed to appear for the final examination if my attendance is less than 75% of lectures derived in each term separately as per Maharashtra State Board & Higher Secondary Education's Rules & Regulation No. 88 (1).
- Wearing of Identity card is compulsory throughout the stay in campus.
- Use of mobile phone is strictly prohibited in the college campus and if found using it, will lead to confiscation of the same for a year.
- I will follow the dress code specified by the college.
- If I damage the college property then disciplinary action will be taken against me.
- Possession of a mobile phone in the Examination Hall / block will be treated as unfair means and will be punished accordingly.
- There will be hybrid mode of lecture i.e. online as well as offline also.



Student Id:- 4967473

1. Student's Personal information

Title	Last Name / Surname	First Name	Middle Name
Mr	Newpane	Himal	Liladhar
Gender	Male	Nationality :	Indian
Date of Birth :	04/03/2007	Religion :	Hindu
Birth Place :	Mira Road	Aadhaar No. :	847974882363
Marital Status :	Unmarried	Employment Status :	Unemployed
Mother tongue	Hindi	Sub Caste :	
Blood group :	A+	Saral No :	2016272107005750490
Caste Category	Open		

2. Contact Detail

Student's Mobile	8779349525	Email	himalnewpane1@gmail.com
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3. Bank Detail

Bank Name	Hdfc Bank	IFSC Code :		Account Number :	
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4. Parent's Detail

Father's/Husband's Full Name	Liladhar	Mother's Name	Sita
Father's/Husband's Mobile	9082594360	Mother's Contact Number	9768736799
Father's Email	himalpandey132@gmail.com	Mother's Email	sitanewpane0908@gmail.com
Father's/Husband's Occupation	Business	Mother's Occupation	House Wife
Family Income	100,000.00	Parent Organisation	None

5. Address Detail

Address of Correspondence	A Wing 301 Sheetal Plaza Sheetal Nagar Mira Road East Thane Mira Road		Pincode : 401107
Country : India	State : Maharashtra	District : Thane	City : Maharashtra
Permanent Address	A Wing 301 Sheetal Plaza Sheetal Nagar Mira Road East Thane Mira Road		Pincode : 401107
Country : India	State : Maharashtra	District : Thane	City : Mira Bhayander

6. Exam Detail's

Exam Name	Board/ University	School / College Name	Year	Exam Seat	Obt Marks	Total Marks	Percentage	Result
Himal Newpane	MAHARASHTRA STATE BOARD	KES Shroff College	2024	FJCM053F	432.00	600.00	72.00	pass

7. Subject Deail's

ENGLISH	ECONOMICS
BOOK KEEPING & ACCOUNTANCY	JALSURAKSHA AND ENVIRONMENT EDUCATION
HEALTH AND PHYSICAL EDUCATION	ORGANIZATION OF COMMERCE AND MANAGEMENT
INFORMATION TECHNOLOGY	MATHEMATICS AND STATISTICS

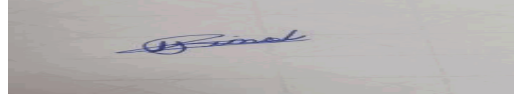
Submitted Document's

AADHAR CARD

FYJC MARKSHEET

UNDERTAKING

I further declare that I will abide by all the rules and the regulations of Maharashtra State Board of Secondary & Higher Secondary Examination.



SIGNATURE OF THE STUDENT

PERMISSION FROM PARENT'S / GUARDIAN

I have permitted my son / Daughter / Ward to join the college and I shall ensure that he / she attends classes regularly and observes the above mentioned rules.



SIGNATURE OF THE PARENT / GUARDIAN

Attachments to be submitted along with the application

- Admission Form.
- Transaction Successful Receipt.
- Xerox copy of 11th Marksheet.
- Fees Challan.
- Laving Certificate and NOC (For taking admission in SYJC)
- Copy of Aadhar Card.
- Cancelled Cheque of their bank account.

PARENTS'S ACCOUNT DETAILS

PARENTS'S ACCOUNT DETAILS	
BANK NAME :	
BRANCH NAME :	
ACCOUNT NUMBER :	
ACCOUNT HOLDER'S NAME :	
ACCOUNT TYPE :	
IFSC CODE :	