

## Student Admission Form

Student Name \_\_\_\_\_

Father Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Gender (Male/Female) \_\_\_\_\_

Residential Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

Department / Field \_\_\_\_\_

Admission For (e.g. First Year / Lateral Entry) \_\_\_\_\_

Board or University \_\_\_\_\_

Enrollment Number \_\_\_\_\_

Exam Center \_\_\_\_\_

Stream \_\_\_\_\_

Marks Secured \_\_\_\_\_

Marks Out Of \_\_\_\_\_

Class Obtained \_\_\_\_\_

Sports Details (Optional) \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_