STUDENT REGISTRATION FORM

FIRST NAME	[Enter first name] (max 30 characters a-z and A-Z)
LAST NAME	[Enter last name] (max 30 characters a-z and A-Z)
DATE OF BIRTH	Day: ⌄ Month: ⌄ Year: ⌄
EMAIL ID	[Enter email address]
MOBILE NUMBER	[Enter mobile number] (11 digit number)
GENDER	Male ○ Female ○
ADDRESS	[ ]
CITY	[Enter city name] (max 30 characters a-z and A-Z)
PIN CODE	[Enter pincode] (6 digit number)
STATE	[Enter state] (max 30 characters a-z and A-Z)
COUNTRY	[Enter country] (max 30 characters a-z and A-Z)
HOBBIES	Drawing ☐ Singing ☐ Dancing ☐ Sketching ☐ Others ☐ [ ]

QUALIFICATION

Sl.No.	Examination	Board	Percentage	Year of Passing
1	Class X			
2	Class XII			
3	Graduation			
4	Masters			
		(10 char max)	(upto 2 decimal)	

COURSES APPLIED FOR   BCA ○ B.Com ○ B.Sc ○ B.A ○

submit   Reset