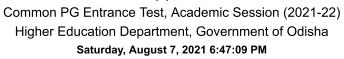


Common Application Form





Personal Details							
Applicant's Name :	icant's Name : GYANENDRA DAS						
Father's Name :	SARAT CHANDRA DAS						
Mother's Name :	PARBATI DAS						
Blood Group :	A+	Gender	:	MALE			
Religion :	HINDU Date of Birth		:	05-Jan-2001			
Identification Type :	AADHAAR	AADHAAR Identification No		641861178102			
State of Domicile :	ODISHA						
Address for Osmosomer							
Address for Corresponde	ence						
Details(Plot/Flat/Building/Village):	GADI, BIDEIPUR, KASIA MARINE		Block / U	Block / ULB :		BASUDEVPUR	
District :	BHADRAK		State	: ODISHA		4	
PIN Code :	756164		Mobile N	lo. :	8260886	6338	
Alternative Mobile No. :	9658441281		e-Mail	: dgyanend		ndra2001@gmail.com	
Reservation Details							
Social Category :	SEBC		PWD	:	NO		
Sub Category :	NONE						
Weightage Details							
NCC :	: NA NSS		S Camp		:	NA	
Rover & Ranger :	: NA Spor		rts & Games		:	NA	
Graduation Examination: APPEARED Have You Passed Graduation With Distinction ?: NO							

Educational Qualification

Name Of The Examination	Stream / Class	Mark Type	Board / University	Year Of Passing	Roll No.	Max Marks / CGPA	Secured Marks / CGPA	% Secured
HIGH SCHOOL/10TH/EQUIVALENT	10TH	MARK	BSE, ODISHA	2016	119CB054	600	449	74.83
+2/EQUIVALENT	SCIENCE	MARK	CHSE, ODISHA	2018	351AB036	600	329	54.83
GRADUATION/EQUIVALENT	SCIENCE	MARK	FAKIRMOHAN UNIVERSITY, BALASORE	2021				

Graduation Subject						
Passed Graduation With?	:	HONOURS				
Core/Hons	:	PHYSICS	Credit	: (84	
Generic Elective	:	CHEMISTRY	Credit	: (12	

Subject For PG Entrance Examination						
SL#	Subject					
1	PHYSICS					

Preference Of Examination Centre

1. BHADRAK (AUTONOMOUS) COLLEGE,BHADRAK

- 2. FAKIR MOHAN (AUTONOMOUS) COLLEGE, BALASORE
- 3. FAKIR MOHAN UNIVERSITY, VYASA VIHAR, BALASORE

Payment Details

Payment Date	Payment Amount	Transaction Number	Payment Mode	Payment Through
07-Aug-2021	500.00	IGALRUIBM0	NB	SBIEPAY

Declaration

I solemnly affirm that the information furnished above is true and correct in all respect to the best of my knowledge and belief. I have not concealed any information. I undertake that if any information herein is found to be incorrect or false, I shall be liable for action as per rules in force.

Date:

Place: Signature of Applicant

8/7/2021 6:47:09 PM