



# J.S. COLLEGE OF EDUCATION

RAJPUR-CHHAJPUR, KANDHLA BUDHANA ROAD, DISTT. MUZAFFARNAGAR (U.P.)

Affiliated to Maa Shakti Bharti University, Saharanpur (U.P.)

**REGISTRATION/ADMISSION FORM**

Regd No .....	Recpt. No. ....	Remarks.....	Provisionally Admitted/Rejected
Amount.....	.....		
Authorised Signatory & Seal	Admission Incharge		Director/Principal

*Note: The form is to be filled in duplicate by the applicant in his own handwriting in BLOCK LETTERS, after reading the instructions carefully.*

1. Class in which admission is required..... Session.....  
2. Choice of subjects.....

(In case of B.Ed. two teaching methodology subjects and one optional only be mentioned)

- |  |   |
|--|---|
| <p>3. Graduation Stream : Arts/Science/Commerce/Agriculture &amp; % age .....</p> <p>4. Full Name of the Applicant (In English) .....</p> <p style="text-align: center;">(In Hindi) .....</p> <p>5. Date of Birth (DD/MM/YY) : .....</p> <p>6. Nationality ..... 7. Sex Male/Female 8. Marital Status .....</p> <p>9. Father's Name .....</p> <p>10. Occupation..... Monthly Income .....</p> <p>11. Mother's Name .....</p> <p>12. Category : SC/ST/OBC/GEN./PH      13. Caste .....</p> <p>14. Address .....</p> | <p>Paste your<br/>Recent Passport<br/>Size Photo<br/>Sign Across it<br/>with date</p> |
|--|---|

Paste your  
Recent Passport  
Size Photo  
Sign Across it  
with date

14. Address For Correspondence Permanent

- .....

- .....

- PIN                  Phone                  PIN                  Phone

- Mobile No. & E-mail** \_\_\_\_\_ **Mobile No. & E-mail** \_\_\_\_\_

- WEDDING DATE & TIME ..... WEDDING NO. & E-mail .....

- .....

15. Educational Qualification (Attach attested photo copies)

- | <b>Examination</b> | <b>Name of the</b> | <b>Month &amp; Year of</b> | <b>Marks</b> | <b>%age of</b> | <b>Subject</b> |
|--------------------|--------------------|----------------------------|--------------|----------------|----------------|
|--------------------|--------------------|----------------------------|--------------|----------------|----------------|

- | Passed | Board/University/Institution | Passing | Obtained/ Total Marks | Marks | Studied |
|--------|------------------------------|---------|-----------------------|-------|---------|
|--------|------------------------------|---------|-----------------------|-------|---------|

- High School**

- Table 1. Summary of the main characteristics of the four groups of patients.

- Intermediate**

- B A/B Comp/

- B.Sc./

- B.Sc (Ag.)

- M.A./M.Com.  
M.Sc./