

CONTACT DETAILS

Permanent Address (Don't Repeat Name)

City..... State Pin Code

Permanent Mobile No. (On which all the important information to be delivered)

Parent/Guardian Name _____ Parent/ Guardian Occupation _____

Parent/Guardian Contact no. _____ Email Id _____

QUALIFYING EXAMINATION DETAILS*

Examination	Degree	Board/University	Name of School/College	Total Marks	Marks Obtained	CGPA	Year of Passing	Subject
High School								
10+2 or Equivalent								
Graduation								
Post Graduation								

* Self attested copies of certificates/marksheet should be attached.

Payment details (applicable for downloaded form only) _____

Mode of Payment	Date	Amount	Campus / Name of the Bank

DECLARATION BY CANDIDATE

I hereby declare that all the information furnished by me are correct & best of my knowledge.

Candidate's Signature _____ Parent's/Guardian Name _____

Parent's/Guardian Signature _____ Place _____ Date _____