



ALIPURDUAR ASHUTOSH B.ED COLLEGE

KHATOPARA : BINDIPARA : ALIPURDUAR

MAHAKAL CHOWPATHI : NEAR NH-31

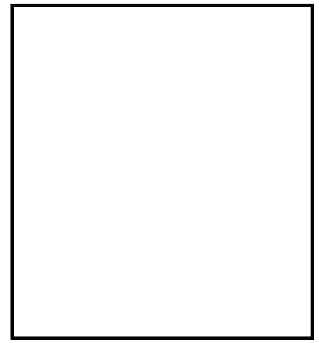
D.EL.ED ADMISSION FORM

APPLICATION ID _____

REGISTRATION NO. _____

ROLL NO. _____ SESSION _____

(For Office use only)



CANDIDATE'S NAME

FATHER'S NAME

OCCUPATION

MOTHER'S NAME

CURRENT ADDRESS : _____
PIN _____

PERMANENT ADDRESS : _____
PIN _____

Email : _____

DEPUTED : YES NO # IDENTITY MARK : _____

AADHAAR NO : _____

STUDENT MOBILE NO. + 9 1 _____ # RELIGION : _____

GUARDIAN MOBILE NO. + 9 1 _____ # CATEGORY : _____

DATE OF BIRTH : DAY _____ MONTH _____ YEAR _____ # BLOOD GROUP : _____

GENDER : MALE FEMALE # NATIONALITY : _____

LAST SCHOOL NAME _____

OBTAINED MARKS DETAILS

SERIAL	NAME OF THE EXAMINATION	BOARD/ UNIVERSITY	YEAR OF PASSING	FULL MARKS	OBTAINED MARKS	%OF MARKS OBTAINED
1	MADHYAMIK / EQUIVALENT EXAM					
2	HIGHER SECONDARY / EQUIVALENT EXAM					
3	B.A. / B.SC. / B.COM. (HONOURS)					
4	M.A. / M.SC. /M.COM / M.E. / M.TECH.					

DATE: _____

SIGNATURE :