



DASHRATH PRASAD SINGH GROUP OF INSTITUTIONS

ADMISSION ENQUIRY FORM (SESSION: 20__ - 20__)

Name Of the Course :-

Affix
Self-Attested
Passport
Size photograph of
The students

1. Full Name of the Candidate: -

(Use BLOCK LETTERS)

2. Date of Birth

(As per ICSE/BSEB/CBSE Certificate)

3. Gender: - Male Female Blood Group:

4. Mother Tongue- Religion- Nationality -

5. Student Category:-

OBC EBC ST/SC PH EWS

6. Marital Status: - Single Married

7. Aadhar Number: - Aadhar Linked Mobile Number: -

8. Contact Number: - Whatsapp Mobile Number: -

9. Email Id: - Alternative Mobile Number: -

10. Identification Marks: (i)..... (ii).....

11. Parent' s Details

| | | | |
|------------------------|--|------------------------|--|
| Father's Name | | Mother's Name | |
| Father's Occupation | | Mother's Occupation | |
| Father's Qualification | | Mother's Qualification | |
| Father's Income | | Mother's Income | |
| Spouse Name | | Spouse Relationship | |
| Mobile Number | | Mobile Number | |

12. Postal Address: -

.....
.....

District..... City Pin Code State

13. Permanent Address: -

.....
District..... City Pin Code State

14. Details of the Examination Passed (Enclose documentary evidences for the entries in these columns) :

| <i>Name of the Examination</i> | <i>Name of the School / College</i> | <i>Board/ Council / University</i> | <i>Year of Passing</i> | <i>Subjects</i> | <i>Total Marks</i> | <i>Marks Obtained</i> | <i>% of Marks</i> |
|---|-------------------------------------|------------------------------------|------------------------|-----------------|--------------------|-----------------------|-------------------|
| <i>10th Level (ICSE/BSEB/CBSE)</i> | | | | | | | |
| <i>10+2 Level (ICSE/BSEB/CBSE)</i> | | | | | | | |
| English Marks:- | Math marks:- | | Biology marks:- | | Final main sub.:- | | |
| <i>Graduation (Hons.)</i> | | | | | | | |

15. Migration No:-..... Issuing Date..... CLC No. Issuing Date
University Name & Address

16. Examination Preferred Language:- Hindi English

17. Hostel facility required? Yes No

- I solemnly declare that the statements made above are true to the best of my knowledge and belief.
- I do hereby undertake to abide by the rules and regulations of the institution.
- I understand that fees once deposited are not refundable.
- I fully undertake that my admission will stand cancelled, in case, any statements made here is found to be false at any time. Also in case I fail to submit the required documents in time or fail to clear all dues to the institute within time.

Date: -

Signature of the Candidate

Place: -

Name
(In capital letters)