Г



DINESH COLLEGE OF EDUCATION

(Recognised by National Council for Teacher Education, Bhubneshwar, Affiliated from Nilamber Pitamber University, Medininagar, Jharkhand & Run by Vananchal Educational & Welfare Trust[®]) Farathiya, Garhwa - 822 114

(To be filled in completely by the candidate in his/her own handwriting only with Blue/Black ball pen.)

Dir	e Principal nesh College of Education rathiya, Garhwa, Jharkhand - 822 114			Self attested Photograph		
1.	Full Name of applicant (in Block Letter	s)				
2.	(a) Date of Birth	Day	Month	Year		
3.	(a) Full Name of Father					
	(b) Full Name of Mother					
	(c) Father's Occupation					
4.	(a) Guardian's Name (If other than parents)					
	(b) Relationship with Guardian					
	(c) Guardian's Occupation					
5.	Correspondence Address					
	State Pin :	Phone No	Mobil	e No		
6.	Permanent Address					
	State Pin :	Phone No.	Mobil	e No		
7.	Name of the Local Guardian If any with	n Address				
	Pin :	Phone No.	Mobil	e No		
8.	Annual income of parent / Guardian					
9.	Sex Reliaid	n	Natio	nality		

10. Do	you belong to	(Tick which is	applicable)
--------	---------------	----------------	-------------

	licit is applicable)					
Caste	Tribe	(c) OBC	(d) General	(e) Othe		nysicaly allenged
(enclose certificate for SC	ST/OBC from aut	hority empow	ered)			
11. Extra Curricular Activities	, if any					
(Enclose Certificate)						
12. Name & Address with Tel.	./Mob. No. of two re	esponsible per	sons who kno	ow your chara	cter:	
(i)						
(ii)						
13. Name of State you belong	g to					
14. Educational Qualification						n Certificate)
(a) Name of the qualifying examination						
(b) Last Examination passed						
(c) Details of Examina	ation passed					
(d) Name of the Schoo	ol / College where la	ast studied wit	h year.			
Name of the	Board/	Year of Passing	Subjects	Marks		
Examination	University			Max./ Total	Obtained	% of Marks
(a) High School or equivalent Exam. 10 th Level						
(b) Intermediate or equivalent Exam. 10 + 2 Level						

15.	Are y	ou employed (if yes give details of employer and furnish a NOC from your employer) Yes 📃 No
16.	Regis	stration No. of Board / University where last studied.
	(a)	Name of the Board / University

(b) Regd. No. & Year

(c) Bachelor's Degree

(d) Master's Degree

(e) Any other Degree

 17. List of enclosures attached
 (i)

 (ii)
 (iii)

 (iii)
 (iv)

 (iv)
 (v)

 (v)
 (vi)

Note : Incomplete application form or non-submission of relevant certificates/Documents in support of any information desired in the application form will be rejected.

Full signature of candidate

MEDICAL CERTIFICATE OF FITNESS OF A CANDIDATE SEEKING ADMISSION IN THE DINESH COLLEGE OF EDUCATION

Farathiya, Garhwa - 822 114 (Jharkhand)

- 1. The student is not suffering from any infectious disease like tuberculosis, Leprosy etc.
- 2. Eye The eyesight should be corrected by glasses to give an acuity of vision of atleast 6/12.
- 3. Ear-He/She should not be completely deaf.
- 4. Legs and hands He / She should not have complete deformity of Legs and Hands, so as to interfare with standing and working during Practical works.
- 5. His / Her Blood Group is ______.

I have examined Mr. / Miss / Mrs.	
Son / daughter / wife of	today on
and certify that Mr. / Miss / Mrs.	is quite fit

for admission in **DINESH COLLEGE OF EDUCATION** according to the criteria as mentioned above.

	Signature of Medical Officer
	Full Name
Date	Registration No
Place	Designation

DECLARATION BY THE CANDIDATE

I.....hereby declare that have filled up this application form myself and to the best of my knowledge and belief the above particulars are true and correct. I have filled up this application after reading all the instructions in the prospectus carefully. I am liable to be punished by expulsion from the Institute or any legal action may also be instituted against me for furnishing false information.

I undertake that so long as I am a student of the Institute / College. I will do nothing unworthy of a student either inside or outside of the institute or any thing that will interfere with its working and discipline. I am aware that the Management / Principal has full right to take any action against me including expulsion if my conduct found unsatisfactory.

Place_____ Date_____

Full Signature of the Applicant

DECLARATION BY THE PARENT/GUARDIAN

I fully endorse the declaration made above by the Candidate, Besides, I hereby declare that I have known the financial obligation and I can afford to pay all the costs mentioned in the prospectus. I guarantee the good conduct and behaviour of my ward during the tenure of the candidate's period of studentship in the Institute.

Place

Date _____

Signature of the Parent / Guardian

FOR OFFICE USE ONLY

Application No.

Admission Incharge

Order of the Principal

_____ ------

ACKNOWLEDGEMENT

Application No.____

Received an application from Mr. / Miss / Mrs.

For admission to B.Ed. Course Session ______ on _____

Receiving Officer