EDITOR OF THE PROPERTY OF THE

SHAILABALA WOMEN'S AUTONOMOUS COLLEGE, CUTTACK

APPLICATION FORM
FOR ADMISSION INTO P.G. CLASSES

Application Form No.

	FOR OFFICE	USES ONLY		
Index No. Category Mark as Per merit list	Roll Numbe	er allotted	Subject	ON INTO P.G.
Signature of Verifying Officer		Signo	nture, Officer-in-Cha	ırge, Admissio
(Please go through	FOR APPLICA the Prospectus		ne form carefully)	
Admission into P.G. in Marks Secured	Maximu		sion	
3. NAME OF THE APPLICANT (In capital Letters)	* [Interview to the second of the		
4. Date of Birth: (In Figures)I (In words)	Date M	onth [Year	
 Category: (Reservation of selevation) Put tick (✓) mark in relevation 				
General S.T. B.R. S.D.P.	S.C. C	OH/PH OSA	ESM Others	3
6. If admitted I propose to re Put tick (✓) mark in releva				
(a) With Parents		(c) In Priva	te Accommo dation	
(b) With Legal Guardian		(d) in Colleg	ge Hostel	
7. Father's Name & Occupati 3. Mother's Name & Occupat	A CONTRACTOR OF THE PARTY OF TH			
9. Nationality 10.	Religion	11. Ma	rital Status	
12. ACADEMIC RECORDS				
	SION PASSING	4 Control of the Cont	MARKS SECURED WITH PERCENTAGE	REMARKS
	The state of the s			
13. RECORD OF EDUCATIONA	L INSTITUTIO	N LAST ATT	ENDED:	i.
NAME OF THE COLLEGE	YEAR OF IC	DINING YE	AR OF LEAVING	REMARKS

of

14. ADDRESS:

8.

	ESPONDENCE	Į.	PERMANENT
NAME:		NAME:	
C/0:		C/O:	
AT:		AT:	
P.O.:		P.O.:	
P.S.:		P.S.:	
DIST:	STATE:	DIST:	STATE:
Tel No. (if any)	PIN:		PIN:

UNDERTAKING

15. I do hereby, agree to abide by the rules of the College/Hostel. I also undertake that any instance of indiscipline and disobedience of the rules laid down by the Government, or any authority empowered by them in this regard or any conduct in the College/Hostel found not satisfactory, my name will automatically be removed from the College/Hostel. I do hereby certify that the information furnished by me in this application is true and correct and I undertake that any wrong information furnished by me detected afterwards will be treated as a cognigible offence.

Full Signature/thumb impression of Parents/Guardians Place: Date:	Full Signature of Place: Date:	the applicant
UNDERTAKING BY THE	APPLICAN'T	
16. Sri/Smt	At	
P.O	Dist	a student ittack do hereby or in the College , it is found that I
Full Signature/thumb impression of Parents/Guardians Place:	Full Signature of Place:	the applicant
UNDERTAKING BY THE PAR	ENTS/GUARDIAN	
17. I	she is found involved in any	ighter/ Ward such activity
Date Place:	Full Signature/thumb impress Parents/Legal Guardian	sion of
18. LIST OF DOCUMENTS ATTACHED 1. 2. 3. 4. 5. 6. 7.		

ACKNOWLEDGEMENT-CUM-INDEX FORM

Admission into P.G	Session 2019-20
Name of the Candidate	
Index No	
Category: General/SC/ST	
**	
	Signature of the Issuing Authority
ACKNOWLEDGEM	ENT-CUM-INDEX FORM
Admission into P.G.	Session 2019-20
Name of the Candidate	
Index No.	
Category: General/SC/ST	

Signature of the Issuing Authority