

# D.EL.ED. ADMISSION FORM, SESSION:2020-2022



## West Bengal Board of Primary Education BISHNUPUR MALLABHUM B.ED. COLLEGE

A B.Ed. & D.El.Ed. College

MAYRAPUKUR, GOSSAINPUR, BISHNUPUR, BANKURA, 722122, W.B.



Application No./Application ID.....

Name of the Applicant.....

Father's Name.....

Mother's Name.....

Guardian's Name (In absence of parents).....

Date of Birth (DD/MM/YYYY)..... Category.....

Age as on-01.07.2020.....Year.....Month.....Days

Sex:.....Marital Status :- Married  Unmarried

### Full Permanent Postal Address of The Candidate: -

Vill:-..... P.O:-.....

P.S:-..... Dist:-..... Pin:-.....

### Contact Number: -

Student Contact Number:..... Guardian Contact Number:.....

Email ID:..... Aadhaar No:.....

### Educational Qualification: -

Name of the Examination	Name of the Council/Board	Name of The Institute	Year of Passing	Marks Obtained	% of the total mark obtained
H.S.					

### Declaration

I do hereby declare that all the above statements are true to the best of my knowledge & belief. My candidature will liable to be cancelled if there is any false or incorrect information. I promise that I shall pay in full all the fees just after admission.

Date: -

Place: -

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Candidate's Signature