ADMISSION FORM FEE: RS. 200/-



KASTURI DEVI COLLEGE

Main Bus Stand, Chaksu, Jaipur-303901 (Raj.) • Mobile : 9680299991/92/93/94 E-mail : kdccs@gmail.com • Website : www.kasturidevicollege.com

ADMISSION APPLICATION FORM

		SESSIC	ON :					
Form Issue Date//							nly)	
Fee Receipt No Scholar No						•		
F	orm No. :					<u> </u>		
S	tream : B.A. B.Co	om.	B.Sc.					
9	tream : M.A M.Sc	, <u> </u>						
				Recei	pt No			
С	lass : Part I Part-	41	Part-III			Form ched	k by sign.	
1. Name of Student (In Capital)								
In Hindi								
2.	Father's Name							
	Occupation					Affix Your		
	WhatsApp Mobile No.					Passport Size		
	E-mail					Photo Here		
3.	Mother's Name							
4.	Date of Birth DDMM YYYY							
5	. Aadhar No.							
	Postal/Permanent Address							
Ο.	District			Pin (Codo			
7								
	Caste Category : General (,) 30 ()) 31() OBC	() Other	s riease spec	ліу <u> </u>		
8.	Subjects:	0		0				
	Compulsory : 1.							
			2					
9.	DOCUMENT INFORMATIO							
	A.10th Mark sheet		3.12th Mark sheet.	0 p	C.Transfer Ce		р	
	D.Bonafide Certificate.		E. Photograph	0 p	F.Caste Certifi	cate.	р	
	G.Migration Certificate.	р						

10. Are Your Already Enroll with Rajasthan University. YES NO							
If Yes Enrollment No							
11. Are Your Want to Join N.S.S. Activity. YES NO							
12. Are You Want To Participate Games. YES NO							
If Yes Name of Game. 1 2							
STUDENT DECLARATION:							
ISon/Daughter of do							
hereby declare that the photograph pasted above, signature marked below and attached documents are mine							
and other details mentioned above are true and correct to the best of my knowledge and belief. I also declare that							
I wish to join Kasturi Devi College, Chaksu in Academic Session							
Class I am submitting my documents self-attested or attested by Gazetted Officer							
or Notary and get it verified by College. If any document/mark sheet / information found fake or incorrect or false							
then I shall be responsible for that and College / University authority has right to take a disciplinary or legal action							
against me. I will follow college rules and regulation.							
Name of Student Signature of Student Counselor Signature							
COLLEGE DECLARATION :							
I have checked all the information of candidate and verified all documents. I do hereby confirm that details							
given above by candidate are correct to the best of my knowledge and belief. I also confirm that the candidate							
may be admitted in Academic Session & Class							
Signature of Principal							
With stamp							