BIMR COLLEGE OF PROFESSION STUDIES

Surya Mandir Road ,Residency, Gwalior -474005(M.P.)

ADMISSION FORM

No			Paste Recent Photo					
Name o	of the course with year							
1.	Full Name (English)		_					
2.	Father's Name and Occupation							
3.	Mother's Name							
	4. Sex_5. Caste_6. Religion		<u> </u>					
7.	Date of BirthAge on 31 st Dec.2020							
8.	Permanent Address with Phone No							
9.	Local Address with name of Local Guardian							
10.	Family Income		<u>-</u>					
11.	Category : [] SC[] ST[OBC[]						
	(Attach certificate in case of reserve category)							
12.	Domicile Residency in M.P. (Yes/No.) if no mention State							
13.	Qualification: (Essential 12 th with Biology)							

S.No	Examination	Board/	Year of	Subject	Total	% in 10+2
	Passed	University	Passing		Marks	PCBE only
1.	10 th /H.Sc					
2.	10+2/H.S.C.C					

I hereby declare with my full conscious that all information given above is correct. If any information found wrong, I shell be responsible for the same. I have read complete information brochure carefully and agree to follow the rules and regulations of the college. The college have right to take legal action if found involving in any antisocial activities during training period, inside /outside the College.

Signature of Parent / Guardian	Signature of Student
Date:	Date: