

☎ : (08333) 278346

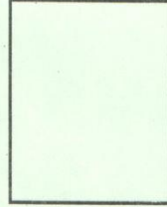


S. J. P. N. Trust's  
**B.C.A. COLLEGE, NIDASOSHI. 591 236**

**Admission Form**

No. \_\_\_\_\_

I wish to take an Admission to \_\_\_\_\_ Semester for BCA course for  
the year \_\_\_\_\_ my particulars are as under



1. Name \_\_\_\_\_  
(Surname) (Name) (Father's Name)

2. Address : \_\_\_\_\_  
Telephone No. \_\_\_\_\_

3. Date of Birth \_\_\_\_\_

4.

Exam	Stream	Board	Yr. of Passing	Percentage	Result
S.S.L.C.					
P.U.C.					
J.O.C.					
Diploma					
Others (Specify)					

5. Parent/Guardian's Name : \_\_\_\_\_  
Occupation : \_\_\_\_\_

6. Income per Year : \_\_\_\_\_

7. Religion : \_\_\_\_\_ Caste : \_\_\_\_\_ Group : \_\_\_\_\_

8. Hobbies : \_\_\_\_\_

9. Sports Details : \_\_\_\_\_

10. Hostel Required : Yes / No \_\_\_\_\_

**DECLARATION OF STUDENT**

I am ready to abide by the Rules and Regulations amended from time to time, and also abide by the rules of discipline of the college. In case of any violation of rules from me, I am liable for the action initiated by the Principal. Furtherers', I hereby declare that the above particulars given are correct to the best of my knowledge and belief.

Place :

Date :

Signature of Parents/Guardian

Signature of the Student

**FOR OFFICE USE**  
Admitted / Not Admitted

Date :

PRINCIPAL

