PURANMAL BAJORIA TEACHERS TRAINING COLLEGE

Nargakothi, Champanagar, Bhagalpur – 812004 (Bihar)

B.ED. PROGRAMME

(Recognised by NCTE-ERC, Bhubaneshwar and Affiliated to T.M. BhagalpurUniversity,Bgp.)

Application for admission in one years Full Time B.Ed. Programme. Please write in BLOCK LETTER while filling up this form.

1.	Subject Applied for: 1. (Hons.)1(2)(3)
2.	Name of the Applicant
3.	Sex: Male Female
4.	Category: . Caste:
5.	Physical Disability (Please write Yes or No in box)
	If yes, Please Specify
6.	Do seek reservation ? (Please tick) Yes No (If yes, attach relevant attested Document/ Certificate issued by S.D.O. office/Civil Surgeon)
7.	Marital status : Married Unmarried
8.	Date of Birth Age (as on 01.07.20)
9.	Nationality
10.	Father's NameOccupation
11.	Mother's NameOccupation
12.	Correspondence Address
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	District State Pin
	Tel. No. (With STD)Mobile No
	E-mail I.D
13.	Permanent Address
	District State Pin
	Tel. No. (With STD) Mobile No

14. Academic Qualification :

Degree	Univ. / Board	Full Marks	Marks Obtained	% of Marks	Div./ Grade
Matric(10th)	等技术点角的企業等				
Intermediate(12th)	b MIT of beneficia bus sawdes	nedudi i	88-9104	d beeln	Boomil)
Graduation	years Fort Tone P. Ed. Pro- tions	ing of the	ie cimba i Bh ishing P		HUGA (SOA)
Post Graduation					

15. Additional/Professional Qualification:

Degree	Univ. / Board	1	ull	Marks Obtained		Div./ Grade
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	ole	60				pelas)
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16.	Language(s) Known :
17.	Computer Knowledge
	Manual status Manual Manual Manual
18.	How did you come to know about us? (Tick the relevant boxes)
	Ex-Students Parents Friend Newspaper Hoarding
	Poster/Kiosk/Banner/Inserts Other
	• Application and a second principle.
19.	Would you be interested in any other course? (Please tick) Yes No
	(If yes, please specify)
20.	Last Qualifying Exam

Note: Please Cary Medical Fitness Certificate Issued by Medical Superintendent/C.S. at the time of Admission.

21. Reference

(known to you for last three years: be local person)

1. Name	2. Name
Address	Address
Tel No	Tel No
Undertaking	from Students
R/o	do hereby declare that the aforesaid in-
formation provided by me is true and correct to	do hereby declare that the aforesaid in- the best of my knowledge and belief and if any of
the said information is found to be false or untru	ie, my admission is liable to be cancelled without
	ne terms and conditions for admission given in the iderstand and agree that the course fee to be paid
by me, shall be paid before the beginning of each	ch semester through a crossed cheque/pay order/
demand draft only in favour of Puranmal Bajoria	leachers Training College, payable at Bhagalpur.
demand draft only in favour of Puranmal Bajoria	raining College, payable at Bhagalpur.
Date:/ Place:	
Date : / Place :	Signature
Date : / Place :	
Date:/ Place: Undertaking from	Signature Parents/Guardians
Date:/ Place: Undertaking from	Signature
Date:/Place: Undertaking from IR/o formation provided by my ward is true and corre	Parents/Guardians F/o/M/o do hereby declare that the aforesaid inect to the best of my knowledge and belief and if
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