

PURANMAL BAJORIA TEACHERS TRAINING COLLEGE

Nargkothi, Champanagar, Bhagalpur - 812004 (Bihar)

Form No. 42

D. El. Ed. Programme

Recognised by ERC, NCTE, Bhubaneshwar and Affiliated to B. S. E. B., Patna.

Application for admission in two years Full Time D. El. Ed. Programme.

Please write in BLOCK LETTER while filling up this form.

1. Stream Subject

1. Name of the Applicant :

2. Sex : Male Female

3. Category : Caste :

4. Physical Disability (Please write Yes or No in box) :

If yes, Please Specify

5. Do seek reservation? (Please tick) : Yes No

(If yes, attach relevant attested Document/Certificate issue by S.D.O. office/Civil Surgeon)

6. Marital Status : Married Unmarried

7. Date of Birth : Age (as on 01.07.20.....)

8. Nationality :

9. Father's Name : Occupation

10. Mother's Name : Occupation

11. Correspondence Address :

District State Pin

E-mail : Mob. :

12. Permanent Address :

District State Pin

Mob. :

13. Academic Qualification :

| Degree | Board | Full Marks | Marks Obtained | % of Marks | Div./ Grade |
|---------------------|-------|------------|----------------|------------|-------------|
| Matric (10th) | | | | | |
| Intermediate (12th) | | | | | |

14. Additional/Professional Qualification :

| Degree | Univ./Board | Full Marks | Marks Obtained | % of Marks | Div./ Grade |
|-----------------|-------------|------------|----------------|------------|-------------|
| Graduation | | | | | |
| Post Graduation | | | | | |



15. Language (s) Known :

16. Computer Knowledge :

17. How did you come to know about us? (Tick the relevant boxes)

Ex-Students Parents Friend News Paper Hoarding
Poster/Kiosk/Banner/Inserts Other

19. Would you be interested in any other course? (Please tick) Yes No

(If yes , please specify.....)

Signature of Candidate

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

20. Reference (know to you for last three years be local person)

1. Name..... 2. Name.....
Address..... Address.....
.....
.....
Mobile Mobile

Undertaking from Students

I..... S/o, D/o
R/o..... do hereby declare that the aforesaid information provided by me is true and correct to the best of my knowledge and belief and if any of the said information is found to be false or untrue, my admission is liable to be cancelled without any further notice. I have read and understood the terms and conditions for admission given in the prospectus and agree to abide by the same. I understand and agree that the course fee to be paid by me, shall be paid before the beginning of each semester through a crossed cheque/pay order/demand draft only in favour of **Puranmal Bajoria Teachers Training College**. Payable at Bhagalpur.

Date Place Signature.....

Undertaking from Parents/ Guardians

I..... F/o, M/o
R/o..... do hereby declare that the aforesaid information provided by my ward is true and correct to the best of my knowledge and belief and if any of the said information is found to be false or untrue, my ward's admission is liable to be cancelled without any further notice and department is free to take any necessary action . I have read and understood the terms and conditions for admission of the DI. Ed. Programme given in the prospectus and agree to abide by same. I understand and agree that my ward will abide by all therules and regulations of the department and maintain the decorum of the campus.

Date Place Signature.....

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ADMIT CARD FOR ENTRANCE TEST

1. Name :

2. Roll No. :

3. Centre of Examination :

4. Date of Exam. :



Signature of Candidate

5. Time of Exam. : a.m to p.m.

Signature of Controller of Examination

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ATTENDANCE CARD FOR ENTRANCE TEST

1. Name :

2. Roll No. :

3. Signature of Candidate at the time of Examination :

4. Signature of the Invigilator :

Signature of Principal



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ACKNOWLEDGEMENT

Session :

E-mail : pbtcollege@gmail.com

Received application with following documents from.....

1. Passport size photo - 4 2. Matriculation Marks Sheet & Certificate 3. +2 Marks Sheet4

4. C.L.C. 5. Any Other (SC/ST/OH/OBC)

Signature of Receiving Oth.