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| Paste a colour photo of the student |

 HARISHCHANDRAPUR COLLEGE MINORITY HOSTEL

P.O.- PIPLA, DIST.- MALDA, PIN- 732125

APPLICATION FORM FOR MINORITY STUDENT/OTHER

*To be filled by the Student:*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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1. Name(In capital Letter):

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2. Father’s Name :

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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1. Mother’s Name :

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |

4. Date of Birth :

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| --- |
|  |

5. Sex(tick the box) Male Female

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

6. Year of Admission in College:

7. Class in which reading :

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |

8. Date of Admission in College :

9. Fees Paid :

|  |
| --- |
| Vill.- P.O.- |
| P.S.- Dist.- |
| Pin.- Mob.- |

10. Address in full :

.............................................. .........................................

Signature of the Guardian Signature of Candidate

|  |
| --- |
| *For office use only*  College Roll No...................... Hostel Admission ID ........................... date:  Signature of Principal/TIC Signature of Hostel Superintendent |

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***Student copy***

Name: .................................................................. Roll No. ..................... Class ............................

Registration No. .................................................. Session ................................................

Signature & date of receiving officer with seal