

U.G.C. ACADEMY

ADMISSION FORM

Physical Science

Chemical Science

Name: _____

Father's Name: _____

Mother's Name: _____

Date of Birth: (DD/MM/YY) _____ Sex: _____

Permanent Address: _____

Correspondence Address: _____

Mobile No.: ----- Ph. No : _____

Email: _____

Course Interested in: _____

Optional Subjects: _____

Educational Qualification:

<i>Examination</i>	<i>Institution</i>	<i>Year</i>	<i>Division</i>	<i>Percentage</i>

Payment Mode:

By Cash _____ By Cheque _____ By Draft _____

Bank Name: _____ Branch _____ Date _____

Any further Information: _____

How did you know about us? _____

Date: _____

Sign. of Applicant

(For Office Use Only)

Enrollment No.: Batch:

I.D. No.: Date of Admission: _____