



RAVI GROUP OF INSTITUTIONS

E.H.-2, Block-D, Near Export Park, Shastri Puram, Agra - 282007

Phone No.: 0562-6538449, 9927955155

www.matabasantidevicollege.com

ESTD. 2004

APPLICATION FORM

FORM NO.	<input type="text"/>
SCHOLARS REG. NO.	<input type="text"/>
ENROLLMENT NO.	<input type="text"/>
ROLL NO.	<input type="text"/>

Paste here your recent passport size photograph

SESSION _____

COURSE TO WHICH ADMISSION IS SOUGHT.....

NAME OF APPLICANT

DATE OF BIRTH : DAY: MONTH: YEAR GENDER: M F

FATHER'S NAME

FATHER OCCUPATION

MOTHER'S NAME

CORRESPONDENCE ADDRESS

PERMANENT ADDRESS

TELEPHONE NO. _____ MOBILE NO _____

NATIONALITY..... CASTE / RELIGION.....

MARK RIGHT() TO THE CATEGORY TO WHICH YOU BELONG AND ATTACH CERTIFICATE

GENERAL S.C. S.T. O.B.C. P.H. OTHER

RECORD OF EXAMINATION PASSED

Examination	Board / University	Passing Year	Division with % of Mark	Subjects
High School				
Inter/ Equivalent				
Bachelor Degree / Diploma / Equivalent				
Post Graduate Degree / Equivalent				
Any other Exam.				

LIST OF ENCLOSURES :

- 1. High School / SCE marks sheet
- 2. Inter / ISC / CBSE mark sheet
- 3. Degree / Diploma / Equivalent mark sheet
- 4. PG Degree / Equivalent mark sheet
- 5. Any other
- 6. Caste certificate

HOW DO YOU COME TO KNOW ABOUT OUR COLLEGE

- Newspaper Hoarding Through Cable T.V.
- Seminar Consultant Friend

Any other (Please Specify) : _____

DECLARATION BY THE APPLICANT

- 1. I hereby declare that all the particulars given in the application and the enclosures are true to the best of my knowledge. If any of the particulars are found incorrect, my candidate may be cancelled.
- 2. I shall abide by the rules and regulations of the college, and also participate in the extra curriculum activities held in the college. If I get admission by giving misleading or incorrect information, the college may cancel my admission and forfeit the fee etc. deposited by me.
- 3. I understand that College has the right to change the syllabus, course structure, course fee, rules & regulations as and when required.
- 4. I understand that FEES once paid will not be refunded under any circumstances.

Place : _____ Date : _____ Signature of the Applicant _____

TO BE FILLED BY PARENT / GUARDIAN

Mr./Mrs. _____ Parent / Guardian of
_____ hereby declare that
above particular furnished by my son / daughter are true to the best of my knowledge & belief and I have no
objection in his / her seeking admission . I also agree to abide by the rules of the college in this regard.

Place : _____ Date : _____ Signature of the Parent / Guardian _____

For office use only

Admitted to the Course	Received.....
Semester.....	Cheque / Draft No..... Dt.....
Category of Seat.....	For Rs.....
Hostel Allotted.....	Concession / Scholarship.....
Bus.....	Any other.....
 Admission Officer	 Principal