Council of Science & Higher Technology

भारत सरकार से मान्यता प्राप्त शिक्षण शिक्षण संस्थान

AN ISO 9001:2015 Certified Organization

Admission Form

Photo

DOA:____/____/_____

Centre Code:_____Reg.No._____

Course Name_____Duration_____

Student's Name:

Mother's Name:

Father's Name:

Date of Birth: D D - M M - Y Y Y Y Gender: Male ☐ Female ☐

Catogories : ST ☐ SC ☐ OBC ☐ GEN ☐ Mobile No:

Address :

Dist: State: Pin:

Last Qualification:

Education	Board/University	Passing Year	Percentage	Division/CGPA

☐ I am agree with Terms & Conditions of the Institute

Student's Signature

For Office Use Only

Student's Acknowledgement Slip

Date...../...../.....

Centre Code.....Centre Name.....

Student's Reg. No. ..... Student's Name .....Course .....

Admission/Reg. Fee.....Tution Fee.....Exam Fee.....C.P.Fee.....

Materiel Fee.....Other Fee.....Total Course Fee.....Discount.....

Study Centre Address.....

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Centre Director Signature & Stam