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Form

**APPLICATION FORM FOR ADMISSION TO  
BACHELOR OF EDUCATION COURSE  
IN  
DR. SHASHI BHUSHAN INSTITUTE OF EDUCATION**  
Lakshirbond, Hailakandi, Assam  
(Recognised by N.C.T.E.)

Attach  
passport Size  
photograph  
here

*For the use of Office only*

*Serial No.....Date.....  
College Roll No. (After admission):.....*

*To be filled in by the candidate in his/her own handwriting.  
Incomplete form may not be accepted)*

1. Name of the Applicant in full : Mr. /Mrs./Miss.....  
(In block letter) .....
2. Father's Name : .....
3. Mothers name : .....
4. Home address : .....
5. Present Address : .....
6. Name of the local Guardian : .....
7. State your Caste / Sub-Caste : .....
8. Age on first of March 200... (According to H.S.L.C Certificate) or date of birth: .....
9. Marital Status (Married or unmarried): .....
10. Academic qualification (attach attested copies of Certificate and marksheets):

Exam Passed	Board / University	Year With Roll No.	Div & P.C of Marks	Subject offreed
Matric / H.S.L.C				
Intermediate / P.U. / H.S.				
B.A / B.Sc. / B.Com				
M.A./M.Sc./ M.Com				

11. Additional Qualification : .....
12. University Registration No. : .....of.....of .....University.  
(Candidates coming from other universities should attach an undertaking that he / she will produce the Migration within a month. He / She should pay eligibility fee and registration fee also)
13. Your Special aptitude : .....
14. Your hobbies : .....

15. Teaching Experience (Length in years):.....  
 (Subject taught) :.....
16. Present employment, if any :.....Designation.....  
 Employer's name and Address :.....  
 Name of the controlling authority with address:.....
17. Which state do you belongs to :.....(candidates from other states are  
 to produce permission from DPI, Assam)
18. Method Subject you intend to offer ( in order of preference) : (Any two)  
 a) Bengali, b) English, c) Hindi, d) Social studies, e) Mathematics, f) Physical science  
 g) Life Science, h) History .
1. 2. 3.  
 4. 5.

**DECLARATION**

I declare that particulars given by me in this form are true to the best of my knowledge and belief. I understand that I shall come under the academic and administrative jurisdiction of Dr. Shashi Bhashan Institute of Education, Hailakandi with effect from the date of admission and the institution may struck off name from the roll in the vent of violation of rules and conduct or for unsatisfactory progress or unauthorized absence.

Date.....  
 .....  
 (Full Signature of the Applicant)

**VERIFICATION**

1. Certificate of academic qualification : .....
2. Mark Sheet :.....
3. Registration / Migration :.....
4. P.R.C (Where necessary) :.....
5. Other testimonial :.....

**Remarks** .....

*Verifying Officer's Signature*

Admission :.....	FEES (To be used by the College)
Tuition :.....	Library caution fees (Refundable)
Magazine :.....	Laboratory caution fees (Refundable)
Other charges :.....	
Late Fee :.....	

Realized a total sum of Rs.....Vide Receipt No.....Dated.....  
 .....  
**Accountant**

**:: PRINCIPALS ORDER ::**

Admission to B.Ed. Course is granted / not granted / Provisionally granted  
 Subject to .....

.....  
**PRINCIPAL**  
**Dr. Shashi Bhashan Institute of Education**  
**Hailakandi**