



CLUSTER UNIVERSITY OF SRINAGAR

SRI PRATAP COLLEGE M.A. Road Srinagar

ADMISSION FORM-2017

Name				Space for Photograph
Father's Name				
Mother's Name				
Permanent Home Address :				
Contact No		Email		
Date of Birth (DD/MM/YYYY) (As per 10 th class certificate)			Board/University Reg. No.	
Category		Adhaar Number		
Physically Disabled (Yes/No)				
Religion:		Gender		
Subject (Tick any One)				
<input type="checkbox"/> Medical		<input type="checkbox"/> Non-Medical		
Admission to following subjects is strictly based on merit(Bio-Chemistry, Biotechnology, Bio-Informatics., Clinical Bio-Chemistry, Human Genetics)				
Preference 1: Subject/Combination No. (As per Online Admission form)				
Preference 2: Subject/Combination No.				
Preference 3: Subject/Combination No.				

Candidates Bank Details

Name of the Bank	Branch	16 Digit Account No.	IFSC Code

Academic Record

Year of Passing / Session (12 th Class)	Roll No	Max Marks	Marks Obtained	%age	Name of Board (JKBOSE/CBSE/Other)	Stream	Name of the Institution from which Passed
/							

UNDERTAKINGS

- I declare that the particulars filled in the form are correct to the best of my knowledge:
- I undertake to abide by all the rules and regulations of the Institution and shall obey the instructions issued from time to time by the Principal of the college. In case of any breach of rules on my part, I shall be liable for any disciplinary action under rules of the college.
- I undertake that I shall regularly attend theory/practical classes. In case I fall short of attendance (required under University status), I shall have no right, whatsoever to sit for the University Examinations.
- I further undertake that offering a particular stream/subject combination, I shall not request for a change.
- I further declare that annual income of my family from all sources is Rs _____

Signature of the Student

Date: _____

Signature of Father/Guardian

Documents Attached: 1. Marks Certificate (10th & 12th)

2 Character/Provisional Certificate

3. DoB Certificate

4. State Subject

5 Category (If any)

6.

For Office Use Only

Subject & Combination No. Allotted

_____ / _____

Name & Signature of Prof. In-charge:

_____ / _____

Name

Signature

Signature of Convener



Cluster University of Srinagar

SRI PRATAP COLLEGE M.A. Road Srinagar

Library Form

College Roll No		Session		Space for Photograph		
Stream		Semester				
Name		Address				
Parentage		Contact No				
Subjects Offered						
1		2				
3		4				
5		6				
S.No	Title	Acc. No.	Issue Date	Sig. of Student	Return Date	Sig. of officer
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

Received College Magazine

Received Identity Card

Sig. of Student

Sig. of Student

Bank Copy

S.No.



J&K Bank

Serving to Empower

FEE PAY-IN-SLIP

AT PAR AT ALL CBS BRANCHES

Branch.....

Dated.....	Credit Principal	SRI	Notes Denomination	Amount Rs.
	PRATAP COLLEGE,		Rs.1000x	
	M.A. Road, Srinagar		Rs.500x	
			Rs.100x	
			Rs.50x	
			Rs.20x	
			Rs.10x	
			Rs.5x	
			Rs.2x	
			Rs.1x	
			Total	

0005040100030237

B/u. Residency Road,
Srinagar.

Rupees (in Words).....

Received an Amount of
Rs.....

**Bank Seal
(Cashier)**

Authorised Officer

Name of Student.....

Class.....Roll No.....

Signature of Depositor

Students Copy

S.No.....



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			Rs.2x	
			Rs.1x	
			Total	

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Authorised Officer

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Class.....Roll No.....

Signature of Depositor

College Copy

S.No.....



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