Cost of form 350/-



LAJPAT RAI D.A.V. COLLEGE, JAGRAON

Managed by : DAV College Managing Committee, New Delhi
(Affiliated with P.U. Chandigarh)

	No. ONLINE APPLICAT	<u>'ION</u>	FOF	RM	F	OR.	ΑI	DN	IIS	SI	<u>NC</u>								
1) Read all the Guidelines and Instructions written in the prospectus before filling up this form.													Please affix your Passport size						
2) No column should be left blank. Write N.A. against column, if the same does not apply to you.												ı	Photograph						
Class to which admission is sought :SemesterSubjects for BA/ B.Sc. Classes												with gum							
	1. English (Compulsory) 2. Punjabi (Compulsory) or HCAdd on Courses (opt one of the following										PREVIOUS RECORD								
	3. Environmental Studies (For all 1st Year students only) Insurance Business										OF THIS COLLEGE								
Select other subjects from Prospectus :												Class							
	2	4	_									Roll No							
					5									Session					
1.	Name (in Block Letters)																		
2.	Father's Name Sh.																		
3.	Mother's Name Mrs.																		
4.	Father's Profession	\Box							Г										
5.	Mother's Profession	$\overline{\Box}$	T																
6.	Panjab University Registration No.	$\overline{\Box}$	T									Ī							
7.	Date of Birth: i) In Figures	YYY	7						-		-	•							
	ii) In words	$\dot{\Box}$	ΪT	Т	Τ	Т	T	Τ	Τ			Τ	Τ		Т		П		
8.	Aadhaar Card No.			İ	İ	İ	İ				•	•	•	<u>'</u>					
9.	ReligionNationality		Urbaı	n/ Ri	ural	l													
10.	Category : General/ Reserved	c	aste_										,						
10.	SC/ST/OBC/ Economically Deprived/ Physicall (Attach Caste / Income/ Medical Certificate/ Yellow C	-	_														-		
11.	Brother/ Sister studying in this college, if Yes	: Class	·			_ Ro	II N	o				_ Se	essi	on_					
12.	Do you want hostel accommodation (Girls On	ly): Ye	es	N	o [
	Permanent Address	_ Ac	Address for correspondence																
			<u> </u>																
																	-		
	PinPh. No	PinPh. No																	
	Parents' Mob	1	Parents' Mob																
	E-mail Address	Email Address																	
13.	The mode of conveyance to be used : Bicycle I, hereby, confirm that if I park my Scooter/ Mo					-			'				•	_		oe			

responsible for the loss of / damage to my vehicle.

14. Academic Record										
Examination	Year / Session	Board/ University	Roll No.	Marks obtained/ Max. Marks	% age of marks	School/College Last Attended	Subjec	cts Studied		
Matriculation										
+2										
BA/Bsc/BCA/B.Com/ BBA/MA/MSc/MCom-I										
BA/Bsc/BCA/B.Com/ BBA/MA/MSc/MCom-II										
BA/Bsc/BCA/B.Com/ BBA/MA/MSc/MCom-III										
BA/Bsc/BCA/B.Com/ BBA/MA/MSc/MCom-IV										
BA/Bsc/BCA/B.Com/ BBA-V										
BA/Bsc/BCA/B.Com/ BBA-VI										
Any other										
15. Gap, if any (state r	eason)_									
							_Affidavit attac	hed: Yes / No		
16. Distinctions (if any	ν), Attacl	ned Certific	cate							
Academic Sp	oorts	Cultur	ral	N.S.S.	NCC	Youth F	estival	Any Other		
		_		DECLAR	ATION					
I hereby affirm that I have read alknowledge. I pledge that I shall a										
ssociate myself with any activitinformation given by me is found	ty that goe	s against the	disciplin	e of the Instit	ution. I am joi	ining the college wi	ith permission of m	y father/guardian. If any		
given by me.	111001100.,	Jonego, ta	ities su	Cancerny Same	iluaturori a.c.	agree to reopen	Jiho or our no se	eye on the ochacine.		
Date			(;	Signature o	f Student)		(Signature of F	Parents/ Guardian		
Recomme	ndation I	by								
Admission Committee	<u>.</u>					Checked	by Office Inch	arge		
1. Signature of Me	mber									
2. Signature of Me	mber					Adm	nitted as Regul	ar/ Provisional		
Scrutiny Committee										
1. Signature of Me	mber					Vice-F	Principal	Principal		
2. Signature of Mer	mber									
Student's ur	ndertaking	g in Special c	ase							
				For Office use only						
		Received :								
					Vide Recei	ipt No.				
					Date	:				
					Balance if	any :				