

ReceiptNo.

Date -

F. No.

G. R. No.



Regal College, Kondhe-Chiplun

At-Kondhe, Guhagar Road, Post-Shiral, Tal-Chiplun Dist-Ratnagiri Pin-415628
Ph. 02355-259393/ 205401

Photo

ADMISSION FORM

For Office use only

Name of Course

Name of Student

(Surname)

(Name)

(Middle Name)

Mother's Name

Phone No. Res. Mob. :

Local Address :

E-mail ID

Permanent Address :

Date of Birth Place of Birth Blood Group

Married / Unmarried Sex : Male Female

Religion Caste

Occupation of Guardian Annual Income (Rs.)

Games & Sports participation level (e.g. College/State/National, etc.)

Declaration

I have carefully read the information given in the prospectus of the college. I declare that the information furnished by ward is fully true and confirms to facts. I know the rules and regulations of the college. I will fully co-operate with the authorities. At the same time I am full aware that any kind of misbehavior or disobeying the rules and regulations will lead to cancellation of my admission. I know that fees once paid will not refundable and not transferable in any circumstances.

Place :

Date :

Student's Signature

Parent's Signature

Attach the following documents with this application.

- 1) H.S.C. Mark Sheet
- 2) Leaving Certificate Original
- 3) Caste Certificate
- 4) Certificate of Income of Guardian
- 5) Non-Creamy Layer Certificate for OBC