



IEHRD COUNCIL

International Education And Human
Resource Development Council

Enrollment No.	
Roll No.	

Admission Form

Session 202.....202.....

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Form No _____

Course Applied _____ Branch _____ Semester _____

Lateral Admission Yes No

STUDENT'S INFORMATION

Name of the Student _____

Date of Birth (DD...../MM...../YY.....) _____ Gender: Male Female

Father's/Husband's Name _____ Occupation _____

Mobile no. _____ E-mail _____

Mother's Name _____ Occupation _____

Mobile No. _____ E-mail _____

Category(Tick only): SC ST OBC SBC General Minority

Special Category(Tick only):

Physically	JK Migrated	Sports	National Awardee
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State: _____

Postal Address _____ Village _____ Tehsil _____
City _____ District _____ Pin _____

Permanent Address _____ Village _____ Tehsil _____
City _____ District _____ Pin _____

Marital status:

Married	Unmarried
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Student's Mobile no _____ E-mail ID _____

Hostel: Yes No Bus facility Yes No

Local guardian's name _____ Mobile _____

SCHOLASTIC RECORD

Academic Record	University/Board	Year of Passing	Total Marks obtained	Maximum Marks	Percentage of Marks	Division
10th						
10+2						
Graduation						
Post Graduation						
Other						

DECLARATION BY THE STUDENT

I hereby declare that the entries made by me in the Application Form are complete and true to the best of my knowledge, belief and information. I hereby undertake to present the original documents for verification immediately upon demand by the concerned authorities of the Institute.

I further declare that my admission may be cancelled, at any stage, if I am found ineligible and/or the informations provided by me are found to be incorrect.

Date.....

(Signature of the Students)