



Admission Form (Session 20__ - 20__)

Registration No.
(For office use)

Shreejee Goverdhan Maharaj College of Professional Studies

Neem Gaon, Railway Station Goverdhan Mathura – 281502, Ph. 05652960166, 05652960177, 7669998001/05

Fax No. : +91-565-2960177, Web: www.gmcollege.ac.in, Email: shreejeegmcollegeinfo@gmail.com

1. Name of the course applied for : _____

2. Name of the candidate in capital letters: _____

(Exactly as mentioned in HSC/SSC)

3. Date of Birth (As per HSC/SSC): Day __ Month __ Year ____ 4. Blood Group ____

5. Father's Name (As per HSC/SSC): _____ S/o _____

6. Father's Education: _____ Father's Occupation: _____

If in Business, its details are: _____

If in Service, its details are: (a) Employer: _____ (b) Designation: _____

7. Mother's Name: _____ D/o _____

8. Mother's Education: _____ Mother's Occupation: _____

If in Business, its details are: _____

If in Service, its details are: (a) Employer _____ (b) Designation _____

9. Category: GEN OBC SC ST 10. Sex: M F

11. Nationality: _____ 12. State/ Union Territory of India : _____

13. Permanent Identification Mark: _____

14. Permanent Address: _____

_____ Pin _____

Phone No. with STD Code: _____ Mobile No.: _____

15. Address for: _____

Correspondence: _____

_____ Pin: _____

Phone No. with STD Code: _____ Mobile No.: _____

16. Details of Qualification:

Passport size
recent
photograph to
be affixed here

EXAMINATION PASSED	SCHOOL / COLLEGE	BOARD / UNIVERSITY	YEAR OF PASSING	OVERALL % age	PCM % age (If applicable)	SUBJECTS TAKEN
10 TH						
12 TH						
GRADUATION						
ANY OTHER						

Shreejee GM College of Professional Studies

17. Mode of Admission: (Tick the appropriate box)

- A) SEE – UPTU – 2010 Roll No Gen Rank Category Rank
- B) AIEEE / AIMCAT Roll No State Rank AIR Rank
- C) Any other exam (please mention) Roll No Rank

18. Mention Roll No. and Merit Position No.: _____

19. Hostel accommodation required (Yes/No): _____

20. Transportation facility required (Yes/No): _____ If yes, from where _____

21. Name & Address of local guardian with relation, if any:

Name: _____ Occupation: _____ Relation: _____

Address with telephone/Mob. No.: _____

Pin: _____

22. **Declaration:** I confirm that the information provided by me in this application form is accurate and correct. I understand that in the event of my admission, if any information provided here by me is found incorrect, my admission could be cancelled without notice.

I further declare that I have never been debarred from any examination or rusticated by any Institution/ University. I also declare that I have not been convicted by any Court of Law in India or abroad at any time for any criminal offence and sentenced to imprisonment as well as no proceedings are pending against me.

I further confirm and undertake to abide by the Rules and Regulations as framed from time to time by the affiliated university as well as by the College.

I assure you to not to indulge in ragging in any form. I am aware that I will be rusticated from the Institute and I am found indulging in any act of ragging directly or indirectly. My name is to be struck off from the rolls of college in the event of indiscipline activity/ ragging case.

Date : _____

Signature in Hindi & English of Father/Mother/Guardian

Signature in Hindi & English of Candidate

Place: _____

(Mother, in case father is not alive/Guardian, if parents are not alive)

Check List

The candidate is required to attach the following documents with the completed application/ admission form:

1. Original and self-attested copies of Mark Sheets & Certificates of 10, 10+2, Diploma, Graduation & Higher Education, if any.
2. Transfer/ Migration Certificate from the Institution/ Board/ University last attended.
3. Character Certificate from the Head of the Institution last attended.
4. Medical Fitness Certificate from CMO.
5. Valid Caste Certificate, if applicable.
6. Domicile Certificate, if applicable.
7. Valid Income Certificate of Valid Guardian.
8. Three Passport size photographs.
9. Copy of PAN and ITR acknowledgement of last FY of Valid Guardian.

Date: _____ (Name & Signature of Scrutiny Officer)

For office use only

Mr. / Ms. _____

Father's Name: _____ is

allowed / not allowed to take admission in Course

_____ on

_____ Seat, on or

before _____

Date:

Representative,
Admission Cell

Director/Principal