

- A Non refundable application fee must be submitted with this form :
- All fields must be completed in order for this application to proceed for assessment
- Please print clearly in BLOCK LETTERS. Use black pen only.
- Attach three Passport size photo.

Official Use Only

APPLICATION No.

Affix your
passport size
photo here



Tick as per the option given below.

1. Gujarati Medium

Commerce

 11th 12th

Science

 11th 12th

2. English Medium

Commerce

 11th 12th

Science

 11th 12th

If opting Science:- Group A (PCM) Group B (PCB)

preference of location : 1.

Karelibaug

Gorwa

Manjalpur

3.

4.

(Follow Page 2 of 2 in Formation Booklet Scelion - F Location of JC Junior College)

Whether approved Part – I [To be filled up by applicant.]

Fresher

Applicant appearing for (std 10th)
for 1st attempt in March 2010-11

Repeater

Applicant appearing for (std 10th)
for 1st attempt in March 2010-11

Previously Passed

Applicant appearing for (std 10th) In any earlier examinations
other March 2010-11(e.g.: Oct 2009, March 2009

Any Other Board (Please Specify)

3. Full name (in block letters) :

Surname

First Name

Middle Name

4. Date of birth (Please enclose certificate)

DD

MM

YEAR

5. Sex :

MALE FEMALE

6. Nationality:

7. Religion:

8. Permanent Address : Name, House no., Mohalla/Street

(use capital letters only)

City :

District :

State :

Pin Code :

Telephone no., including mobile number, if any.

code

Mobile No:

Mobile No:

9. Details of educational qualifications of Parent

1. Father's name

Surname	First Name	Middle Name
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Qualification

Occupation Mobile:

2. Mother's name

Surname	First Name	Middle Name
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Qualification

Occupation Mobile:

10. Details of educational qualifications Applicant

(Please enclose copies of certificates attested by a gazetted officer)

Examination passed University/Board	Institute/Council of Examination	Main subjects	Year of passing Percentage	Marks/ Division/ Class/ Grade

11. Details of Marks Obtained

Sr No.	Subject	Marks / Grade		Percentage / Grade
		Maximum	Obtained	
1.				
2.				
3.				
4.				
5.				
6.				
7.				
Total				

DECLARATION OF PARENTS'/GUARDIAN'S INCOME

If any stage, it is found that the information given by me is false/not true, all benefits given to the student and his admission could be withdrawn and legal action as deemed fit, may be taken against me or my ward.

Signature of the Parent's/ Guardian :

Date :

Signature of the Applicant

Date :

Name :

Name :

Referred by (if any) : _____ Contact no : _____

Address : _____
