

DLS SHIKSHA MAHAVIDHYALAY

Badluganj, Barahat, Ishipur, Bhagalpur (Bihar) 813206

Form No. _____

B.Ed./D. El. Ed. Programme

Affiliated By : Tilkamanjhi Bhagalpur University, Bhagalpur & B.S.E.B., PATNA

Application for admission in two years Full Time B.Ed./D.El.Ed. Programme.
Please write in BLOCK LETTER while filling up this form.

1. Stream Subject

1. Name of the Applicant :

2. Sex : Male Female

3. Category : Caste :

4. Physical Disability (Please write Yes or No in box) :

If yes, Please Specify

5. Do seek reservation? (Please tick) : Yes No

(If yes, attach relevant attested Document/Certificate issue by S.D.O. office/Civil Surgeon)

6. Marital Status : Married Unmarried

7. Date of Birth : Age (as on 01.07.20.....)

8. Nationality :

9. Father's Name : Occupation

10. Mother's Name : Occupation

11. Correspondence Address :

District State Pin

E-mail : Mob. :

12. Permanent Address :

District State Pin

Mob. :

13. Academic Qualification :

Degree	Board	Full Marks	Marks Obtained	% of Marks	Div./ Grade
Matric (10th)					
Intermediate (12th)					

14. Additional/Professional Qualification :

Degree	Univ./Board	Full Marks	Marks Obtained	% of Marks	Div./ Grade
Graduation					
Post Graduation					



15. Language (s) Known :

16. Computer Knowledge :

17. Subject of B.Ed. :

7. (a) Social Science/Language		7. (a) Science	7. (a) Commerce
7 (b) History	Hindi	7 (b) Physics	7 (b) Accountancy
Geography	English	Chemistry	Business Study
Civics		Biology	
Sanskrit/Bengali		Mathematics	
Economics			
Uedu / Persian			

18. University name and registration number of last qualification :

Signature of Candidate

Undertaking from Students

I..... S/o, D/o

R/o..... do hereby declare that the aforesaid information provided by me is true and correct to the best of my knowledge and belief and if any of the said information is found to be false or untrue, my admission is liable to be cancelled without any further notice. I have read and understood the terms and conditions for admission given in the prospectus and agree to abide by the same. I understand and agree that the course fee to be paid by me, shall be paid before the beginning of each semester through a crossed cheque/pay order/demand draft only in favour of **DLS SIKSHA MAHAVIDYALAY**. Payable at Bhagalpur.

Date Place Signature.....

Undertaking from Parents/ Guardians

I..... F/o, M/o

R/o..... do hereby declare that the aforesaid information provided by my ward is true and correct to the best of my knowledge and belief and if any of the said information is found to be false or untrue, my ward's admission is liable to be cancelled without any further notice and department is free to take any necessary action . I have read and understood the terms and conditions for admission of the B.Ed./D.El.Ed. Programme given in the prospectus and agree to abide by same. I understand and agree that my ward will abide by all the rules and regulations of the department and maintain the decorum of the campus.

Date Place Signature.....