



B.B.M. B.Ed. COLLEGE

SARDAHA, CHAS, BOKARO (JHARKHAND) - 827013

Recognised by NCTE, Bhuneswar

Affiliated to BINOD BIHARI MAHTO KOYALANCHAL UNIVERSITY, DHANBAD & JAC, Ranchi

Application Form for Admission in D.El.Ed. Course / B.Ed. Course

Form No.:

Session : 20.....20.....

FOR OFFICE USE ONLY			Roll No. :
Verifying Official	Office Assistant	Date:	

(To be filled in Capital Letters by the Applicant in his / her own handwriting)

1.	Name:							Photo						
2.	देवनागरी में नाम													
3.	Father's Name													
4.	Mother's Name													
5.	Husband's Name													
6.	Permanent Address	Vill.				P.O.			P.S.					
		Dist.				State			Pin					
7.	Address for Correspondence													
		Vill.				P.O.			P.S.					
		Dist.				State			Pin					
										Mob.				
8.	Date of Birth						9. Sex		10. Marital Status				11. Nationality	
													Other Specify	
12.	Phone No (0) (R) (Mob.)													
13.	Aadhar No.					E-mail Address :								
14.	Category:	Gen.	OBC	EWS	SC	ST	15. Blood Group :							
16.	Whether Handicapped-													
17.	Details of Educational Qualification:													
Examination Passed		Year	Div/ Class	Marks Obtained	Board/ University	Subject	Full Marks	%of Marks	For Office use Only (Points)					
Matriculation														
I.A./I.Sc./I.Com/+2														
B.A./B.Sc/B.Com														
M.A./M.Sc./M.Com														
Extra Qualification														
NCC Certificate		Passed Certificate "B"				CML RANK								
Sports		Represented at State Level				Represented at National level								
						TOTAL								

• Tick which is applicable. Attach self attested Photocopy of Certificates.

RECEIPT

Form No.

D.El.Ed / B.Ed.

Received application form for admission in D.El.Ed / B.Ed Course form.....

.....(Name of the Applicant)

Received by



17. Subject offered in B.A./B.Sc./B.Com.: 1 2 3 4

18. Subject offered in M.A./M.Sc./M.Com.:

19. Name of Natural Guardian Relationship
(If father is not alive)

20. Place of stay after admission: with Parents/With Natural Guardian/With Local Guardian
Place of Stay:
Place For Correspondence:

21. Name and address of Local Guardian:
Tel.....(O) (R) (M)

22. Teaching Method Combination desired:

Method 1

Method 2

23.1 solemnly declare and certify that the particulars furnished above are true to the best of my
Knowledge and belief.

.....
Full Signature of Applicant in English

.....
Full Signature of Applicant in Hindi

24. Draft No.....Amount.....

Name of Bank Date.....

Declaration:

I..... Son/daughter of.....
an applicant for admission to the course hereby declare to abide by the rules and regulations of the
college failing which my admission may be cancelled at any time. I further declare to attend
classes, library and tutorials as per prescribed regulation of B.Ed. Course.

Date:

Place: Counter Signature of Parent/Guardian

Applicant's Signature

****Note: Incomplete Forms will not be considered.**