

Form No. :



**SANDIP FOUNDATION'S**  
**SHRI NITYANAND JHA COLLEGE OF EDUCATION**

AT SIJOUL, PO - MAILAM, DIST. - MADHUBANI, BIHAR

Tel. No. 7549990951, 7549991044

E-mail : [info@sandipfoundation.org](mailto:info@sandipfoundation.org)

Website : [www.sandipfoundation.org](http://www.sandipfoundation.org)

Approved by NCTE, New Delhi, and Affiliated to Aryabhata Knowledge University, Patna.

Affix  
Latest  
Photograph

**ERP No. :**

[illegible]

**CRN :**

[illegible]

# ADMISSION FORM

## ADMISSION TO COLLEGE OF EDUCATION

FOR THE ACADEMIC YEAR 20 - 20

## A) INFORMATION OF CANDIDATE

1. Name of the Applicants as per SSS / HSC / GRADUATION Mark Sheet (IN CAPITAL LETTERS)

[illegible][illegible]

2. Date of Birth								Age		Yrs.	Sex :	M	F	Blood Group : _____
------------------	--	--	--	--	--	--	--	-----	--	------	-------	---	---	---------------------

3. Place of Birth : Village									Taluka									
-----------------------------	--	--	--	--	--	--	--	--	--------	--	--	--	--	--	--	--	--	--

Dist.								State								
-------	--	--	--	--	--	--	--	-------	--	--	--	--	--	--	--	--

[illegible]

5. Religion : 



 Category 



 Caste

[illegible]

## B) INFORMATION OF PARENT / GUARDIAN

1. Name of the Parent / Guardian :

[illegible]

2. Qualification		Relationship with Candidate	
------------------	--	-----------------------------	--

3. Father's / Guardian's Occupation : Service / Business / Agriculture

[illegible]

5. Annual Income of Family : 

--	--	--	--	--	--

C) ADDRESS OF THE PARENT / GUARDIAN :

Correspondence Address : \_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_

Permanent Address : \_\_\_\_\_

\_\_\_\_\_ Pin Code \_\_\_\_\_

D) EDUCATIONAL QUALIFICATION DETAILS :

Name of Exam	Name of Board / University	Month & Year of Passing	Marks Obtained	Total Marks	% of Marks

Document Checked by (Name of staff member) : \_\_\_\_\_ Sign. \_\_\_\_\_

Documents Verified by (Name of Office Clerk) : \_\_\_\_\_ Sign. \_\_\_\_\_

CHECK LIST OF CERTIFICATES TO BE ATTACHED WITH THE APPLICATION FORM

(All Certificates Should be in original + two sets of attested Xerox Copies + Four Latest Photographs)

No.	Original Admission Documents	Y	N
1	SSC Mark Sheet & Certificate		
2	HSC Mark Sheet & Certificate		
3	School Leaving / Transfer Certificate		
4	Caste Certificate		
5	Non-Creamy-Layer Certificate		
6	Graduation Marksheet / Certificate		

No.	Original Admission Documents	Y	N
7	Post Graduation		
8	Caste Validity Certificate		
9	Nationality Certificate		
10	Domicile Certificate		
11	Migration Certificate		
12	Passport size Four Photographs		

**LIST OF CERTIFICATES TO BE SUBMITTED BY (Date) :**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Signature of Parents/Guardian

Signature of Students

Place :

Date :

**FOR OFFICE USE ONLY**

1. Name of Candidate : \_\_\_\_\_
2. Academic Year : \_\_\_\_\_
3. Receipt No. : \_\_\_\_\_ Amount Paid Rs. \_\_\_\_\_ Dated : \_\_\_\_\_
4. By Cash / Cheque / D.D.No. : \_\_\_\_\_ Dated : \_\_\_\_\_
- Bank \_\_\_\_\_

Date : \_\_\_\_\_

(Name & Sign. of the Accountant)

Date : \_\_\_\_\_

**PRINCIPAL**

## UNDERTAKING

I, \_\_\_\_\_ do hereby undertake that I shall abide by the following rules and the rules that would be implemented from time to time, by the Institute, Aryabhatta Knowledge University, Patna and during all my studentship in the college. I know that these rules are mandatory and binding on me, and if I violate any of the rules, I shall face disciplinary action, as deemed fit by the College Authorities.

1. I understand that the minimum attendance is mandatory in the college during the year.
2. I understand that ragging in Campus and / or outside, either verbal or physical or of any kind is totally prohibited and is a punishable offence as per the Govt. of Bihar Acts. I will not indulge in any kind of ragging. I will maintain co-ordial relations with all students and will never get indulged in such activities.
3. I understand that wearing College Uniform during college hours is compulsory. I know that the defaulters may not be allowed to enter the campus.
4. I understand that I have to always carry Identity Card along with me and produce the same when demanded.
5. I understand that my behaviour with my fellow students, staff and teachers would be upright. I know that misbehaviour with students, staff and / or teachers will not be tolerated and would be viewed seriously by the College Authorities.
6. I understand that is my moral responsibility to safeguard the College Property. In case I cause any damage or loss to the college property, I undertake that I shall make good the same.
7. I understand the consuming of tobacco or any other narcotic product is one or other form is strictly prohibited in and around the college campus. I undertake to keep myself away from such bad habits.
8. I understand that the college authorities are very particular in maintaining the sanctity of the examination system. I undertake not to get involved in any malpractice whatsoever during examination. I further know that if found guilty, I am subject to disciplinary action.
9. I understand that taking common-off are not permitted by the college and strict action would taken by the college authorities against those who get involved in such activities. Further, I undertake not to get involved in such activities, and attend the college regularly.
10. I understand that if any of these rules are not adhered to, I may invite inquiry against me. The decision of the inquiry committee in the matter would be final and binding on me.
11. I understand that issuing of NOC is the right of the Institute. The NOC will be provided as pe the Institute's Rules & Regulations, unless there are rules and regulations provided by the NCTE/AKU, Patna.
12. A candidate seeking cancellation of admission shall pay full fees without any concession and submit all the original documents required for admission, before applying for the cancellation.
13. There will not be any refund of fees against cancellation of admission if he / she have been admitted through Management quota of through Vacancies after completion of allotment round by University. He / She have to pay total fees.

I hereby declare that I have read, understand and shall follow the above rules. Hence, I give this undertaking.

Place : \_\_\_\_\_ Name of the Student : \_\_\_\_\_ Sign. \_\_\_\_\_

Date :     /     /     Name of the Parent / Guardian : \_\_\_\_\_ Sign. \_\_\_\_\_