Estd. 1912

Phone : ~~2321073~~
8960000428
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KARAMAT HUSAIN MUSLIM GIRLS' POST GRADUATE COLLEGE, LUCKNOW

An Associated College of Lucknow University
(A Minority Institution)
Website : www.karamatpgcollege.org E-mail : info@karamatpgcollege.org

Form No. 2300

REGISTRATION FORM

B.Com. PART .....

Session .....

(Registration of student does not give guarantee for admission to College)

Affix Recent Passport size Photograph here

1. Class to which admission is sought.....
2. Date of application.....
3. Name of scholar (Block letters).....
4. Father's Name (Block letters).....
5. Mother's Name (block letters).....
6. Date of Birth (as per High School Certificate).....
7. Father's/Guardian's address.....
   Local.....PIN No. .....
   Permanent.....PIN No. .....
   Phone No. (Land line).....Mobile .....
8. Father's / Guardian's Occupation.....Annual Income.....
   & Full Departmental Address (if any).....
9. (i) Length of scholar's residence in U.P.....
   (ii) Nationality.....
10. Name of last Institution attended.....
11. Whether the scholar ever attended this Institution? Mention year.....
12. Scholar's Mother tongue.....
13. Religion.....
14. Does the scholar belong to the Scheduled Castes/ tribes/backward classes, if yes submit certificate.....
15. **Examinations Passed**
    (Those who passed the Intermediate exam, earlier than two years must submit an affidavit on general stamp paper stating reasons for the gap)

CLASS	College	University / Board	Year	Div.	Percentage	Subjects
High School						
Inter						

16. *Those who have failed or have appeared at the supplementary exam of any class should submit mark sheets of that examination.*

I / We declare that the particulars given above are true and correct and nothing has been concealed.

I/We agree to abide by the rules of the institution.

.....
Signature of Parent/Guardian

.....
Signature of Candidate

RECEIPT SLIP

Form No. 2300

Session .....

Affix Recent Passport size Photograph here

1. Name of Student.....
2. Father's Name.....
3. Class : B.Com. Part.....
4. Date .....

Signature of Receiving Clerk
(Seal)