

## Sarswati Mahavidhalaya

VPO-Norangpura, The-Rajgarh, Distt-Churu Rajasthan - 331303

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Application No: Admission/20/	Date:	DD/MM/YYYY
For Office	Use Only	
Registration No :	Date: DD/MM/YYYY  Receipt No :	
Amount :	Receipt No	
	Sigr	n Cashier
Admission Required for:		
B.Sc. B.A.		
A. INFORMATION OF THE STUDENT	Plea	ase Affix Recent
1. FIRST NAME MIDDLE NAME		sport Size Photo
2. FATHER'S NAME:		
3. MOTHER'S NAME:		
4. GENDER: MALE FEMAL	LE OTHER	
5. DOB: / / /		
DD MM YYYY  6. COMMUNITY: GEN OBC	SC ST EWS	
7. AADHAAR NO:		
8. JAN AADHAR NO:		
9. CONTACT NO:		
10. F-Mail ID :		

11.RESII	DENTIAL ADD	DRESS:	CORRESPONDE	ENCE ADDRESS	S: SAME:	
	VIL	LAGE	VILLAGE  TEHSIL  DISTRICT			
	TE	HSIL				
	DIS	TRICT				
	STATE PIN COD		STATE	STATE P		
Previous	s Study Detai	ls:				
S.No.	Class	Institute Name	Year	Total Marks	%age Marks	
1.	X <sup>th</sup>					
2.	XII <sup>th</sup>					
Enclosu a. o. c. d. e.	Transfer Cei Aadhaar Ca Jan Aadhaai Passport siz	ents are mandatory at the tir rtificate(T.C.) (Latest) rd (Both Student & Parents/C r Card (Both Student & Parer e photos- 2 (Student) ears Mark-Sheets	Guardian)	n ORIGINAL):		
f. g. ove doc	Character C	cate (Only for OBC/EWS/SC ertificate  with two self-attested cop	,	oduced at the til	me of admission.,	
Declarat I, providing declare tl I shall at	ion:any evidence	S D/oneeded to support the infoents provided in this applications of the management.	rmation provided	undertake t here, if necessa my knowledge a	he responsibility ary for any reason nd if found otherwi	
Date: DD/	MM/YYYY	Signature of S	tudent:	Signature o	f Principal	

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