



SEMESTER-IV
ADMISSION FORM
BIKALI COLLEGE, DHUPDHARA
SESSION: 2024-2025

Batch : _____

Stream: _____

1. Name of the Applicant (In Capital Letters): _____

2. Identity Card Roll No. _____

3. GU Roll No : _____

4. GU Registration No: _____

5. Contact No. _____

6. Email ID : _____

7. Combination of Subjects : Major Course :

	Subject
Major one	
AEC	

8. Combination of Subjects: Regular Course :

	Subject 1	Subject 2
Minor Two		
AEC		

I hereby declare that the above statements are true to the best of my knowledge and I am liable to any punishment by the College authority for any wrong statement made by me. As a student I shall not resort to any act of indiscipline or indulge in any misconduct undermining the academic or administrative interests of the College.

Signature of Guardian:
Date:
Place :

Signature of the Applicant
Date:
Place:

The particulars of the applicant are verified and found correct. He / She is allowed to get himself/herself admitted into as desired.

Full Signature of Mentor :

Signature of the Principal

Date :
