

# HARIHARPUR

# E-DIGIT COMPUTER CENTRE

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(Registered Under the Govt. Of West Bengal Societies Registration ACT XXVI of 1961)  
VILL- HARIHARPUR, P.O.- MALLICKPUR, P.S.- BARUIPUR, DIST.- 24  
PGS(S), KOL- 700145

**AN ISO 9001:2015 & 10002:2014 CERTIFIED INSTITUTE**



## APPLICATION FORM

### Student Details

(Please write your name in full and in CAPITAL letters)

Name:

First Name

Middle Name

Last Name

Father's Name:

Mother's Name:

Personal Details:

Blood Group

Sex(M/F)

Nationality

Religion

Date of Birth

Caste

:

Category:

A a d h a a r N u m b e r

### Address For Correspondence

State:  District:

Block:  Vill./Locality/Lane:

P.O. & P.S.:  Pin/Kolkata:

Telephone:  033  Mobile:

### Parent's Details

Father's Occupation: \_\_\_\_\_ (If Business, Explain type of Business): \_\_\_\_\_

\_\_\_\_\_ Designation: \_\_\_\_\_

Mobile Number:

Mother's Occupation: \_\_\_\_\_ (If Business, Explain type of Business): \_\_\_\_\_

\_\_\_\_\_ Designation: \_\_\_\_\_

Mobile Number:

### Guardian's Details

Name of the Guardian: \_\_\_\_\_

Permanent Address of the Guardian:

State:  District:

Block:  Vill./Locality/Lane:

P.O. & P.S.:  Pin/Kolkata:

Mobile Number:

### Qualification Details

**Mark Secured in each subject in Secondary Examination or Equivalent:**

Ben	Eng	Geo	Hist	Math	L.Sci	Phy.Sci	Total	Grade

**Mark Secured in each subject in 10+2 Examination:**

Sub-I	Sub-II	Sub-III	Sub-IV	Sub-V	Sub-VI	Total	Grade

School Name/Class	Mark

Graduation (University Name)

Declaration: I hear by declare that all above information stated in the application form are true to the best of my knowledge.

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

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Applicant's Signature