

OMSHREE MAHAVIDYALAYA

Plot No. 17/39 Sadar Bazar Sagar (M.P.)
Affilated to Dr. Hari Singh Gour University, Sagar
Approved by National Council of Teachers Education.

विद्या व	त्याति विश्वया		ADMISSION FO	<u>ORM</u>		No		
Academic session 20 – 20								
1. N	ame of course							
2. N	ame of the applicant							
3. Fa	ather's Name							
4. M	lother's Name							
5. C	ategory		6. Religion					
7. Nationality8. Mother Tongue								
9. D	9. Date of birth Place of birth							
10. l	Present address							
-	Tel. NoWhatsApp No							
11.	11. Permanent address							
Tel. NoMobMob								
12. Are you permanent resident of Madhya Pradesh ?								
13. If no. which state you belong to								
14. Name of the Institution Last attended								
15. Educational Qualification (Class 10 th onwards):								
Sr. No.	Name of the Examination	Year of Passing	Name of the Board/University	Subjects .	Division	Percentage of marks obtained		
1.	10 th							
2.	12 th							
3.	Graduation							
4.	Post Graduation							

	(ii) If yes, name and address of	the employer	
17 18	. Are y ou employed . If yes, name and address of the	employer	
19			
	_	Declaration of candida	
bel	This is ce rtified that the informalief. In case, any information is fome.	ation men tione d above is correct ound incor rect, the decision of the	to the best of my knowledge and institute will be final and acceptable
Pla	ace		
Da	te	(signature of applicant)	
	<u>Decl</u>	aration of Parent/Gua	<u>rdian</u>
 res	(relati	on) (applicant	of name), hereby undertake the o promise to pay all the dues of the
Pla	ace		
Da	te	Signature	9
Lis	at of documents to be enclosed	d:-	Yes No
1	10th		
2	12th	:	
3	Graduation		
4	Post Graduation		
5	Cast Certificate		
6	Residence certificate		
7	Two color passport size photog	ıraph	
8	Aadhaar Card		
9	College/University leaving & Cl	naracter certificate	
			(Signature of the applicant)