



ADMISSION APPLICATION FORM

Courses Offered

BA (Computer Science) B.Sc (Information Technology)
 B.Com PGDCA

1. COURSE APPLIED FOR

Course Name: _____ Academic Session: **2026-2027**

2. STUDENT DETAILS

Full Name of Student: _____

Father's Name: _____

Mother's Name: _____

Gender: Male Female Other

Date of Birth (DD/MM/YYYY): _____

Category: General SC ST BC Other _____

Aadhaar Number: _____ (N.B.-Seeded With Bank A/c in Case of SC Category)

Mobile Number: 1. _____ 2. _____

Email ID: _____

Permanent Address: Land Mark _____

City/Village: _____ District: _____ State: _____

PIN Code: _____

3. ACADEMIC QUALIFICATION DETAILS-

Class	Board / University	Year of Passing	Total Marks	Marks Obtained	Subjects
10 th					
12 th					
Graduation (for PGDCA)					

4. DOCUMENTS REQUIRED (Self-Attested Copies to be attached along with originals)

<input type="checkbox"/> 10th Mark sheet & Certificate	<input type="checkbox"/> 12th Mark sheet & Certificate
<input type="checkbox"/> Graduation Mark sheet/ Degree (for PGDCA)	<input type="checkbox"/> Aadhaar Card
<input type="checkbox"/> Category / Caste Certificate (if applicable)	<input type="checkbox"/> Latest Income Certificate
<input type="checkbox"/> Migration Certificate (if applicable)	<input type="checkbox"/> Bank Account Copy/Details
<input type="checkbox"/> Passport Size Photographs (4)	<input type="checkbox"/> Gap Certificate (if applicable)
<input type="checkbox"/> Character Certificate	

5. DECLARATION BY THE STUDENT

I hereby declare that the information furnished above is true and correct to the best of my knowledge. I understand that admission is subject to verification of documents and eligibility as per university norms. I agree to abide by the rules and regulations of the institute and the affiliating university.

Date: _____

Place: _____

Signature of Student: _____

6. PARENT / GUARDIAN DECLARATION

I hereby confirm that the information provided by my ward is correct. I take responsibility for his/her conduct and agree to abide by the rules and regulations of Nirman Campus of Education Research & Training, Sunam.

Name of Parent / Guardian: _____ Mobile No. : _____

Signature of Parent / Guardian: _____

FOR OFFICE USE ONLY

Registration No.: _____ Course Admitted: _____

Documents Verified: Yes No

Fee Paid: ₹ _____

Date: _____

Mode of Payment: Cash Online Cheque

Remarks _____

Admission Approved By: _____

Signature with Seal: _____