ABDUL KALAM NATIONAL YOUTH CENTRE

A National Institute of Information Technology Education & Research
(An Autonomous Institution Registered Under the Public Trust Act.)
Regd. No. 03678/18, Public Trust Act. W.B.
Course Registered Under C.R. Act 1957, MHRD,
(Dept. of Secondary & Higher Education)
Govt. of India

Registration Form

Enrollment No. : (For Head Office Only)

Fill the form in BLOCK LETTERS (English) only using BLUE / BLACK ink only

Paste one recent passport size photograph

Please do not Pin or Stamp

1. Full Name of the Applicant (Space should be given between First name, Surname & Last name)

2. Father's Name (Space should be given between First name, Surname & Last name)

3. Mother's Name (Space should be given between First name, Surname & Last name)

4. Complete Address for correspondence (Do not repeat name)

Pin -

5. Category
ST SC Handicapped Others

6. Nationality

7. Religion

8. Date of Birth

9. Sex
M-Male
F-Female

10. E-book Medium
E-English
H-Hindi
B-Bengali

11. Mobile

12. Telephone Number with STD Code

13. E-Mail ID :

14. Details of Qualifying Examination:

Exam. Passed	Name of Board/University	School/College Name	Year of Passing	% Obtained

Enclosure : Demand Draft Attested Xerox copy of last qualification & Caste Certificate

DECLARATION BY THE APPLICANT

I have read all the rules and regulation of the institute and admission to the course applied for. I declare that the above information is true and correct to my knowledge and belief and I fully understand that my admission will Stan cancelled if any information by me is found to be false or twisted.

Signature of Applicant

FOR THE OFFICE USE ONLY

ASC Centre Name :

ASC Centre Code :

Date of Admission :

Course Code :

Course Name :

Authorized Signature