

Form No.:

Religion

Whether Vaccinated for Covid-19 (YES/NO)

## VIVEKANAND MAHAVIDYALAYA

## K.K. ROAD, MOUDHAPARA, RAIPUR

(Run by Durga Education Society) Email Id: vmvraipur@gmail.com

Phone: 0771-2887918

Particulars Required For Admission

To be filled by Applicant Completely

Photo	
gnature	

	Signature					
Personal Details of Applicant						
Name						
Date of Birth						
Age(As on 01 July 2021)						
Gender (Male/Female/ Others)						
Caste						
Category (ST/SC/OBC/UR)						
Mother's Name						
Mother's Profession						
Father's Name						
Father's Profession						
Basic Annual Income of Parents/Guardians						
Marital Status						
Contact no. of Parents/ Guardians						
Email Id of Applicant						
Mobile Number of Applicant	Whatsapp No.					
Subject Details / Course Applied for						
Course: B.Com() BBA()	BCA( ) M.Com( ) PGDCA( )					
Year: I() II() III()	Medium: English( ) Hindi ( )					
Present Address Details						
Address	District					
	Pin Code					
	State					
Permanent Address Details						
Address	District					
	Pin Code					
	State					
Other Details of Applicant						

**Blood Group** 

Aadhar No.

S.N.	Name of Exam	Year	Roll No.	Marks Obtai		I Board / University		ty State	% of Marks	Result
	10 <sup>th</sup>			Max Marks				_	TVICTIO	
1									-	
2	12 <sup>th</sup>									
3										
4										
5										
Bank	Details of	Applicant	::							
Name of Bank						Ac	Account Number			
Branch						IFS	IFS Code of Bank			
				DECL	AR	AT	ION			
here b throug involv	y declare the hand the rules ed in any k	nat the aboand regulation industrial to the same and the	tions of the ging or unwa	ed information college and I wanted activities	are vill wl	stru strich	e to best of my knoctly follow the same against the interand attendance in to any change in address.	e. I also as erest of the	ssure that college a	I will not be and solemnly brime duty.
Name of Parents:					Signature of Applicant					
	Signature	<b>:</b> :								
				For officia	al ı	ıse (	only			
Docu	ments requ	ired at th	e time of ad							
	(Original)	2. 1	0th class Ma	arksheet (xerox	CC	opy)	3. 12th Cla	ss Marksh	eet (xerox	copy)

5. Elegiblity certificate (For Other State Board/Other University)

Name & Signautre of Concerned HOD

Signature of Principal

7. Photo Copy of Aadhar Card

(As proof of address/Domicile)

Date:

1. TC (Original)

4. Previous year/ Sem Marksheet

6. Migration Certificate (Xerox):

(Original to be submitted at the time of enrollment)

Name & Signature of Admission Committee: