

LADY KEANE COLLEGE

SHILLONG (MEGHALAYA)

NAAC Accredited "A" Grade

Serial No.

BCA

APPLICATION FOR ADMISSION TO BACHELOR OF COMPUTER APPLICATIONS

1. Name of Student in full [block letters] _____

2. Date of Birth _____

3. [a] Father's Name _____

[b] Father's Occupation _____

[c] Mother's Name _____

[d] Mother's Occupation _____

4. [a] Present Address _____

[b] Permanent Address _____

Urban / Rural _____

Phone No: _____

5. Name and Address of Local Guardian _____

Phone No: _____

6. Nationality _____

7. Community _____

8. Category - ST/SC/OBC/GEN _____

Please Specify

* Attested copy of Domicile Certificate of the applicant is to be enclosed.

9. Religion _____

10. School / College last attended _____

11. BPL Family [Please Tick]

YES

NO

12. Bank Name, Account Number & IFSC Code _____

PERSONAL DETAILS FOR IDENTITY CARD

Full Name _____

Class: BCA

Roll No _____

Blood Group _____

Contact No _____

Present Address _____

Paste Passport Photo

Size: 3.5cm X 4.5cm

Do Not Staple

ACKNOWLEDGEMENT

Received the Application Form into BCA

Serial No.



NAAC Accredited "A" Grade

DATE: _____

FOR PRINCIPAL

Admission formalities are to be completed within 24 hours after Admission has been granted

13. Examination[s] Passed

Examination	Board / University	Roll No.	Year	Division	Percentage

14. Proficiency in sports, extra-curricular activities etc. _____

15. Extension Service _____

Note: Attested copies of Domicile Certificate and Certificates of Sl. nos. 8, 10 & 14 are to be enclosed

UNDERTAKING

I, Smti _____, of BCA, Lady Keane College, do affirm, that I have read the Prospectus of the college carefully and pledge that I shall not directly or indirectly commit, participate or instigate ragging within or outside the college campus.

I further, pledge that in the event of being found violating the rules of the College, I shall be liable for any punishment deemed fit by the college authority.

DATE : ____/____/20____

Endorsed:

Signature of the Student

Signature of the Parent /Guardian

I agree / do not agree to be a member of the parent teacher Association of Lady Keane College

Signature of the Parent

For Office Use:

ADMISSION GRANTED/ NOT GRANTED

PRINCIPAL

ROLL NO _____

BACHELOR OF COMPUTER APPLICATIONS

SESSION - (20____20____)

Paid Rs. _____ Receipt No _____ Date ____/____/____

Office Assistant _____