



V.K. JAIN COLLEGE OF EDUCATION

SORON ROAD, KASGANJ

APPLICATION/REGISTRATION FORM FOR

B.Ed. Session 20

Name of Candidate			
Name of Father/ Husband			
Name of Mother			
Date of Birth			
Category			
Address & Mob. No.			
Roll No. Bed Entrance		General Rank	
Admission through	Counseling/Direct		

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a
Photo
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Qualification:-

Name of Examination	Year of Passing	Board/ University	Subjects	Marks Obtd.	%	Divi.
Secondary						
Sr. Secondary						
Graduation						
Post Graduation						
Other.....						

Date:

Signature of the Applicant