



EFOY EDU TECH

An Autonomous Body Regd. Under Govt. Of WB based on TR Act 1882, Govt. Of India.

E-mail: efoyed@gmail.com; Website: www.foyed.edu.in

Centre Name:

Full Name of the Applicant:

Father's Name:

Mother Name:

Complete Address:

.....
.....

Mobile No:

Course Name:

Category: ST/ SC/ OBC/ GEN Other:

Date of Birth:.....

Sex M/ F:.....

Detail of Qualifying Examination

Name of Board/University School / College Name	% Obtained	Year of Passing	Name of Board/University School / College Name
SSC/10th			
Inter/12th			
Others			

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 stand cancelled if any information by me is found to be false or twisted.

.....
Date

.....
Signature of Applicant

.....
For Office Use Only

Form Receiving Date:.....

Roll No: