

ADHARSHILA LAW COLLEGE OF PROFESSIONAL COURSES

RAJNAGAR, (ATAURA BUZURG) , KANPUR ROAD,(NH-232) RAEBARELI

ADMISSION FORM

Opted semester _____

NAME OF APPLICANT _____
FATHER'S NAME _____
MOTHER'S NAME _____
NAME OF PAPER –
1- _____
2- _____
3- _____
4- _____
5- _____
6- _____

Self
Attested

ANNUAL INCOME _____

UNIVERSITY ROLL NO. _____

CLASS _____ SEMESTER _____

MARKS Obtained _____ PERCENTAGE _____

DATE OF BIRTH _____ SEX _____

PLACE OF BIRTH _____ STATE _____

NATIONALITY _____ RELIGION _____

CATEGORY 1-SC 2-ST 3-OBC 4-GEN 5- ANY OTHER

COMPLETE MAILING ADDRESS (PLEASE INCLUDE STATE, TELEPHONE, FAX, E-MAIL, DETAILS IF ANY)

PIN _____ STATE _____ PHONE NO. _____

FAX _____ E-MAIL _____

DECLARATION BY THE CANDIDTATE

I _____ fullfill all the eligibility conditions as laid down in the prospectus. I have not been debarred from taking admission in any educational institution of India. If admitted I will abide by the disciplinary and other rules and regulation of Adharshila Law College of Professional Courses, Raebareli, enforced from time to time. I promiss not to indulge in ragging or any other un desireble activity against college norms and prejudical to the interest of the college, which will attract disciplinary action. The information given by me in my application is true to the best of my knowledge and belief.

Place _____

Signature of candidate

Date _____