

INFORMATION RELATED TO APPLICATION FORMS & FEES

PAYMENT DETAILS

NAME & ADDRESS : _____
OF THE COLLEGE : _____
CONTACT NUMBER : _____
E-MAIL ID : _____
COLLEGE CODE : _____
NAME OF THE COURSE /
EXAMINATION : _____
YEAR : _____
TOTAL NUMBER OF STUDENTS: _____

PAYMENT Through : **Demand Draft Only**
AMOUNT : _____
NAME OF THE BANK : _____
DEMAND DRAFT NUMBER : _____
DEMAND DRAFT DATE : _____

STUDENT DETAILS (PLEASE ARRANGE ACCORDING TO SEAT NOS.)
(in case of B.A/B.COM/M.A./M.COM arrange data according to specializationwise
as well as seat numberwise)

SR. NO.	NAME OF THE STUDENT	NAME OF THE EXAM.	PASSING MONTH & YEAR	SEAT NUMBER	CONVOCATI ON FEES	RECEIPT NUMBER & DATE