Website: www.aggarwalcollege.org Email: aggpgcollege@gmail.com



AGGARWAL COLLEGE BALLABGARH A Post Graduate Co-educational College Accredited 'A' Grade by NAAC, CGPA: 3.40

ADMISSION FORM 2015-16

Sr. No.			Roll No							
1.	Class Fa	aculty	Date of Admission							
2.	Name of the Applicant (In Cap		Receipt No.							
3.	Male/Female/Others					. ——				
4.	Date of Birth									
5.	Father's Name									
6.	Grandfather's Name		Photo of Photo of Photo of					oto of		
7.	Mother's Name						Father the Mo			
8.	Permanent Address					auror				
	Landmark									
9.	Local Address									
			17. Annual Income of Family							
			18. Are you only single girl child? If Yes, Attach Affidavit							
	Contact No.		(For PG students only)							
	(i) Student			Do you write	with Left	Hand or R	ight Hand	1?		
	(ii) Father/Mother		20.	If you were a	student o	f this colle	ge last ye	ar, mention		
10.	E-mail of Applicant :			your class an						
11.	E-mail of Parents :			Have you pre	-			nich you are		
12.	(i) Nationality			seeking admi						
10	(ii) State to which you belon	-		Roll No						
13.	Aadhaar No.	(Attach Copy)	22. Have you got Re-Appear in the last examination							
14.	Subjects Offered:				Mention Subjects :					
	(i)									
	(ii)		23. Were you detained last year? (Yes / No) If Yes, on what							
	(iii)			grounds (Attendance shortage/Internal assessi						
	(iv)(v)		24 Do you wish to join NCC/NCC/Cmonto/Dod Care = 9 /Ti-1-1							
	(v)(vi)		24. Do you wish to join NCC/NSS/Sports/Red Cross? (Tick)25. Do you belong to Minority Communities i.e. (Jain,							
	(· · ·)			Muslim, Christian, Sikh, Buddhist or Parsi)? If s						
	(vii)		mention your religion					131). 11 30,		
15.	Do you belong to the SC/ST/OBC/SBC/Physically		26. Do you want to park your vehicle in the college? If yes,							
	Challenged/Dependent of ESM/Freedom Fighter		please tick (Cycle/Scooter/M/Cycle)							
	category. If so, mention your category and		27. Is your name included in the Electoral Rolls?							
	subcaste (Attach Certificate)		Yes/No (Tick the correct one)							
	Otherwise write General		If yes, Attach Copy of Electoral Photo Identity Card. If							
16.	Do you belong to BPL/EBP Category (If Yes, Attach		No, collect Form 6 from the college office, fill it and							
	Certificate)		submit the same with the Admission Form.							
S.	Examinations Passed	University/	Year	Roll No.	Division	Marks	% of	Remarks		
No.		College/School				Obtained	Marks			
1										
2										
3										
4				<u> </u>	l .	ı	<u> </u>	' 		

Note: Under the rules and regulation of M.D. University, Rohtak and Haryana Education Dept., the Principal has full powers and unfettered discretion in all matters pertaining to the internal administration of the college, which will comprise detention of students or disciplinary action in the interest of the college.

(To be filled by the Student)

- Read the Information Broucher carefully before filling the Admisstion Form.
- All columns to be filled by the student before submitting the Admisstion Form.

DECLARATION BY THE APPLICANT

- 1. "I declare that I am applying for admission with the consent of my parents/guardian and that the particulars given above are correct. I have read the college prospectus for 2015-2016 as well as the admission requirements as laid down by the University for the course. I agree to abide by the rules and regulations given therein. I further declare that I shall submit myself to disciplinary jurisdiction of the Principal of the college, the Vice-Chancellor and the other authorities of the University who may be vested with the power to exercise discipline under the Act, the Statutes, the Ordinances and Rules framed by the University in this regard. I understand that my admission if made by the college is provisional and will be subject to confirmation by the University. In case my admission is cancelled by the University, I shall have no claim for refund of fee paid by me to the college or the University.
- 2. I undertake that I shall not indulge in any act of ragging otherwise my admission to the college shall stand cancelled and disciplinary proceedings be initiated against me.
- 3. I have read the minimum requirement of lectures and other conditions to appear in the university examinations.
- 4. I understand that I will have to attend at least 65% of the total lectures delivered in each subject, theory and practical separately and obtain 40% marks in each subject in class tests/house exams/ assignments and in the internal assessment as the case may be, failing which I will not be allowed to appear in the university examinations.

	Signature of Applicant						
Date							
I undertake to collect the progress report of my ward from the college office monthly.							
	(Signature of Father/Guardian)						
Detail of documents attached:							
1							
2	Eligibility Checked &						
3	Recommended for Admission						
4							
	Admission Committee						
	Admit						
	Principal						

-i	STUDENT PROFILE FOR IDENTITY CAR	CARD	STUDENT PROFILE FOR IDENTITY CARD
	Session: 2015-2016		Session: 2015-2016
	1. Name of Dept		1. Name of Dept
	2. Course	Affix your Photograph	Athx your 2. Course
	3. Roll No	201	3. Roll No
	4. Name		4. Name
	5. Father's Name		5. Father's Name
	6. Date of BirthSign	Sign. of the Student	6. Date of BirthSign. of the Student
	7. Correspondence Address		7. Correspondence Address
	Phone No.		Phone No.
	8. Date of Admission		8. Date of Admission
	STUDENT PROFILE FOR IDENTITY (CARD	STUDENT PROFILE FOR IDENTITY CARD
	Session: 2015-2016		Session: 2015-2016
	1. Name of Dept.		1. Name of Dept.
	2. Course	Affix your Photograph	Affix your 2. Course Photograph
	3. Roll No		3. Roll No
	4. Name		4. Name
	5. Father's Name		5. Father's Name
	6. Date of Birth Sign	Sign. of the Student	6. Date of Birth Sign. of the Student
	7. Correspondence Address		7. Correspondence Address
	Phone No.		Phone No.
	8. Date of Admission	_ _	8. Date of Admission
		-	
		•	

MEDICAL CARD

	MEDICAL CARD	:		er
			•	Receiv
Class	Roll No		•	Signature of Receiver
1.	Name	S. No	•	Sign
2.	Age	S.	•	
3.	Father's Name			
4.	Parent's Telephone No.		•	
5.	Address		i: ::	
			From Shri / Kumari	
			Shri /]	
			From	
6.	B.P			
7.	Blood Group		•	
8.	HeightWeight			
9.	Previous History of illness		•	
	(Migraine, Epilepsy, Asthma, Diabetes, Blood Pressure)			
			lass)	
			for (C	
			Form	
			ssion	
			Admi	
Signa			Received Admission Form for (Class)	o
(IVIECII	cal Officer) Signature of Parents Signature of Student		Rec	Date