Scholar B.Ed. College

Sl. No. : 639

(Affiliated to Vinoba Bhave University, Hazaribag)
(Recognized by NCTE, Bhubneshwar)

email : scholar.bed@gmail.com
website : scholarbedcollege.com
Contacts : 7808566666

Roll No. _____

Recent Passport Size Photo

APPLICATION FORM

FOR BACHELOR OF EDUCATION COURSE (B.Ed.)

SESSION 20_____ Date of Admission_____

(Fill in the block letters)

NAME:

FATHER'S NAME:

MOTHER'S NAME:

OCCUPATION:

ADDRESS FOR CORRESPONDENCE:

PIN-

PERMANENT ADDRESS:

PIN-

DATE OF BIRTH: SEX: Male ☐ Female ☐

AADHAR NO. :

MOBILE NO. 1 MOBILE NO. 2

E-MAIL ID :

CATEGORY: General ☐ OBC ☐ SC ☐ ST ☐ PH ☐ (Please mark with ☑ where applicable)

SUBJECT :-

(Applicant should attach Certificate issued by the competent authority (I)either by the Civil SDO or the Deputy Commissioner in case belong to OBC/ SC/ ST (ii) In case of physically handicapped, certificate must be issued by the Civil Surgeon.

State : Nationality