**AKAL COLLEGE OF EDUCATION FOR WOMEN FATEHGARH CHHANNA (SANGRUR)**

**Affiliated to Punjabi University, Patiala & approved by NCTE**

**Phone: 01672 246145, Website: acewfc.in , Email:** [**akal.college@yahoo.com**](mailto:akal.college@yahoo.com)

**REGISTRATION FORM 2020-22**

*Paste Self attested Passport* Size Photograph

**Class in which admission is sought……………..**

1. Name of the Student: *……………………………*

2. Father’s Name: …………………………

3. Mother’s Name: …………………………

4. Permanent Address: ………………………………………………

5. Date of Birth : ………………………………...6. E-mail Address…………………..

7. Contact No. (Student): …………………............8. Whats App No……………………

9. Contact No. ( Parents) ……………………… .. 10. Aadhar Card No…………………

11. Category: (Gen/SC/OBC): ……………………….. ……………………………..………..

12. Name of the institution from where the last degree is received………………………………

13. College Bus facility required: Yes No

14 . **Qualification**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Exam Passed | Board/ University | Name of Institution | Year | Roll No | Max. Marks | Marks Obt. | % of Marks | Subject Passed |
| 10 th |  |  |  |  |  |  |  |  |
| 10+2 |  |  |  |  |  |  |  |  |
| B.A/B.Sc./ B.Tech |  |  |  |  |  |  |  |  |
| M.A/M.Sc. |  |  |  |  |  |  |  |  |

15. Are you interested in B.Ed? …………………………………………………………………………….

16. Feedback about the Seminar …………………………………………………………………………….

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Date……………… Signature of the Applicant