



LAL BAHADUR SHASTRI COLLEGE OF HIGHER EDUCATION, BAREILLY

(Affiliated to M.J.P.Rohilkhand University, Bareilly)

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Form No.
to be given by office

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**BBA
2018-2021**

**Registration Form
(To be filled by the applicant)**

1. Full Name.....
(In Capital Letters)

2. Date of Birth..... 3. Sex Male Female

4. Correspondence Address.....
.....PIN..... Phone.....Fax.....

E-mail.....

5. Permanent Address
.....PIN.....Phone.....Fax.....

6. Nationality..... 7. State of Domicile.....

8. Father's Name/ Husband's Name..... Occupation.....

Official Address.....

Phone No. Mobile: -

9. Academic Qualifications

EXAMINATION PASSED	YEAR OF PASSING OUT	NAME OF SCHOOL/ALONG WITH NAME OF BAORD	SUBJECTS	PERCENTAGE OF MARKS OBTAINED
10th				
12th				

DECLARATION

I declare that the information given in the application form is true. I also declare that I have not applied earlier with the same written score in the same category. The application, if found incorrect, at any stage, may be rejected without notice.

Date.....

Signature of the Applicant