2<sup>nd</sup> Year

## BCARE INSTITUTE OF MANAGEMENT & TECHNOLOGY (POLYTECHNIC)



**Course Applied for: Diploma In** 

2. Mechanical Engg.

1. Civil Engg.

(3 years Diploma Course) Under the Society of BARSEED

## AICTE Approved Diploma Engineering Institute, Affiliated to WBSCTVESD

Campus: Kanfala, Nabagram (Beside NH-34), Dist: Murshidabad. W.B, PIN - 742184

Website: www.bimt.org.in II Email: bimtpoly@gmail.com

1<sup>st</sup> Year

Phone: 8967158821/ 9474747179/ 7864888061/ 6294515804 (Office)

3. 4.		cal Engg. onics & Telecomm	nunication E	ngg.										
1.	a) Nam	e( As in Mark Sheet (Blocked Letters)	) :											
	b) Cont	act Telephone No	: Resido	ence:			Mo	bile:						
2.	Sex		: Male	: Male Female										
3.	Father's	s / Guardian's Name	Name :											
4.	Contact No : Residence: Mobile:													
5.	Mother's Name (Blocked Letters):													
6.	a ) Date of Birth :													
	b) Age as per MP or Equivalent													
	examina	ation record as on	:YearMonthDays											
7.	A. Place	of Birth	: B. AADHAAR NO.:											
8.	,													
9. C	Caste		: General	S	c	IJ <sub>ST</sub> L		OBC- A		OBC- B				
10.	Blood Group :													
11.	Identifi	cation Mark (If any)	:											
12.	Email I	)	:											
13.	Academ	nic Qualification	:									,		
	ination ssed	Name of Board/ University	School/ College	Year of Passing	Marks Obtained		Total Marks	Total Perce ntage	Divn/ Grad e	Reg.No	Roll No			
					Phy.	Math	Total		iiiage	e				

14. Name of the Local Guardian	and Relation with the App	licant (If father is not Gua	ardian)								
A. i) Name (Block Letter)	:										
ii) Relation	:										
iii) Address	:										
District	State		PIN	<del></del>							
Contact No.	: Off. :	Res. :	Mob. :								
15. Address											
B. i) Present Postal Address of Stud	lent :										
District	State	PI	N								
ii) Permanent Residential Address	s of Student:										
District	State		PIN								
16. a) Hostel Accommodation Requ	uired : Yes	NO									
b) Distance in KM from Residen	ce to College:	F	KM								
c) Kanyashree ID.:											
17. Payment will be made in favou	r of "BCARE INSTITUTE OF	MANAGEMNT & TECHNO	DLOGY" payable at								
a) D.D NO	DA	TE	AMOUNT	of							
	Bank			_Branch							
b) Online Payment through	ine Payment through A/C No- 1620050000505										
		A/C Name –	BCARE INSTITUTE OF MANAG	EMENT & TECHNOLOGY							
	IFSC- PUNB0162020										
18. DECLARATION: -											
1. I hereby declare that, all the star in the event of any information bei		· ·		knowledge and belief and							
2. I promise to abide by the rules a	nd regulations of the Instit	cution/College and West E	Bengal State Council of Technic	al Education strictly.							
3. A fine will be charged per month pay it.	n, if the semester fees are	not cleared before the co	ommencement of the next semi	ester and I will be liable to							
Any amount paid to the college d	luring admission process	or any,is absolutely non	n refundable.								
DATE:											