

Rs - 200/-

Date

BASANT LAL MEMORIAL COLLEGE OF EDUCATION

Campus: V.P.O. Garhi Harsaru

Gurgaon-123506

Phone: 0124 - 2276549 E mail: bmitm2004@yahoo.com Website: www.blmindia.com

FOR OFFICE USE ONLY					APPLICATION FORM					
Application number					B.Ed Arts Science	Photograph				
Day		Month	Year							
					JBT/D.Ed					
Please	read carefi	ully before you co	mplete this ap	plication forn	n.					
a) Please complete the application form in CAPITAL Letters in Blue/Black ink.										
B)	It is your responsibility to ensure that the application with necessary certificates/ testimonials is received by BLMCE before the closing date.									
c)	Filling of the Form does not guarantee admission to the college.									
d) Computer generated form will only be accepted along with the application form fee either cash or DD in favor of B.L.M College of Ed										

at Gurgaon.						
1 PERSONA	L DETAILS					
			Day	Month	Year	
Gender : Male I	Female	Date of Birth				
First Name:				Surname/	/Family Name:	
Father's /Husband Name:						
Permanent Address:						
City:		State	e:		Post Code:	
Cell:		(R) Tel.:				
E-mail Address:					Nationality:	
2 ACADEMIC	C QUALIFICA	TIONS				
Qualification	Subject		Year		University/Board/Institution	% of Marks
Qualification			From	To	Offiversity/board/institution	obtained
X						
XII						
Graduation						
Post Graduation						
0.4 (Pl 6 :6)						

XII							
Graduation							
Post Graduation							
Other (Please Specify)							
3 ENTRANCE EXAM DETAILS							
CATEGORY General OBC SC/ST							
Roll No		Rank					
				Student Signature			
4 FOR OFFICE USE :							
Fee Receipt No:	Amount :		Admission Code				

Signature