COMPUTER CENTRE::TEZPUR UNIVERSITY

Form No…….

APPLICATION FORM

(*For Admission to the Training Programme for DOEACC 'O' level course*)

Affix one recent Photograph duly attested

1. Name of the Applicant : (in block letter)
2. (a) Address for correspondence :

   (b) Contact telephone No. :
3. Date of Birth :
4. Sex (M/F) :
5. Category (SC/ST/GEN etc.) : (Relevant certificate is to be enclosed)
6. Father/Mother/Legal Guardian :
   - i. Name :
   - ii. Occupation :
   - iii. Address :

7. Academic qualification (Starting from Std. X Exam) (Matric Admit & H.S. Marksheet to be enclosed) :

Name of Exam Passed/Appeared	Year of passing	Class / Division	% of Marks	Scholarship (if any)

8. For Candidate currently undergoing studies :
   - i. Name of the Institution :
   - ii. Class / Level :
9. If employed please specify :

10. Any other information : :

Declaration

I, …….. , here by declare that all the statements made above are true to the best of my knowledge and belief. If admitted, I agree to complete the full term of the course and failing which, I shall forfeit the caution money deposited at the time of admission.

Place :
Date : Signature of Candidate