

I.

II.

MAHISHADAL RAJ COLLEGE

Deen Dayal Upadhay KAUSHAL Kendra MAHISHADAL : PURBA MEDINIPUR : PIN - 721628

ADMISSION TO 3 YR B.VOC DEGREE COURSES

Photo

B.Voc APPLICATION FORM

PERSONAL DETAILS								
A.	Candidate's Name :							
B.	Father's/ Guardian's Name :							
C.	Mother's Name:							
D.	Date of Birth :							
E.	Gender :							
F.	Category : SC* / ST* / OBC-A* /OBC-B*/ GEN (tick only in the appropriate category)							
G.	Person with any Disability : YES*/NO (tick only in the appropriate category)							
H.	AADHAR Card Number:							
COMMUNICATION DETAILS								
A. F	Permanent Address:							
B. Pr	esent Address :							

III. COURSE DETAILS (in which Admission is sought) (Please √in appropriate course)

Sl	Course for which Admission is Seeking	Please tick in the appropriate box
1	B.Voc in Health Care	
2	B.Voc in Automobile	
3	B.Voc in Medical Laboratory Technology	
4	B.Voc in Hospitality Mangement	
5	B.Voc in Retail Management & Operations	

IV. CONTACT DETAILS:

•	0.17											
		e Candidate										
W	hatsApp	Number										
Fa	ther / G	uardian's Name										
M	obile/Wh	natsApp Number										
Ca	ndidate	's Email Address (If any)									
V.	EDUCA	ATIONAL PERFORMA	NCE :									
V. EDUCATIONAL PERFORMANCE : (A) Details of Higher Secondary / Equivalent (10 + 2) Examination Passed												
			/ / Equival	lent (10	+ 2) Exam							
	1 Na	ame of Examination				2	Year of Passing					
	3 Ro	oll & Number				4	Council / Board					
	5 Re	5 Registration No with Session										
	Statem	ent of Marks Obtained in	n the High	er Seco	ndary / Eq	uiva	lent (1	10 + 2) Exam	inat	ion		
	Sl	Subjects Taken (eg. Beng, Eng, etc)	Full M	Full Marks Obtaine			ined	Grand To	%Obtained			
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								<u> </u>				
(B))Details	of Marks Madhyamik /E	quivalent	Examin	nation Pass	e						
	Name of Examination (Madhyamik or Equivalent)		В	oard	Year of Passing		,	Total Marks Obtained		% Marks		
	L		l				1			1		
Full Signature of the Candidate												
	For Office Use Only											
Of	fice No .			CM No		•••		Date				

Download the Application Form, Fill up all relevant points in Capital Letters with Blue / Black pen and then Scan the duly filled up Application Form in either pdf or jpg format and send to our Email: mrcbvocadmission2025@gmail.com or whatsapp the same to : 9733038150

RollNo.....

Class: B.Voc 1st Yr / 2nd Yr / 3rd Yr