GOVERNMENT OF ASSAM
APPLICATION FORM FOR PARAMEDICAL COURSES, SESSION 2016

Space for Photograph

Left Thumb impression

1. Name in Block letters

2. Father's Name

3. Mother's Name

4. Permanent Address

PIN	Telephone with STD Code
Mobile No	
E-mail address (if any)	

5. Date of Birth D D M M Y Y Y Y

6. Age as on 31/12/2016 .....

7. Year of passing H.S.S.L.C. (Sc) Y Y Y Y

8. Name of the College/School from where passed H.S.S.L.C.(Sc) : _____

9. Are you a permanent resident of Assam Yes ☐ No ☐
If yes, enclose certificate.

10. Do you belongs to any Reserved category Yes ☐ No ☐
If yes, indicate category (Tick where applicable)
(Please furnish necessary certificate)

ST(P)	ST(H)	OBC/MOBC	SC	PH	Char area	TGL/Ex-TGL	Unemployed Family Quota (UEF)

11. Marks obtained in HSSLC (Sc) Final Examination

Subject	Total Marks	Marks obtained	Total marks obtained in PCB	Percentage of the three subjects taken together
Physics (P)				
Chemistry (C)				
Biology (B)				

I declare that the particulars furnished by me above are true to the best of my knowledge and belief. I undertake to abide by the rules for admission and to surrender the seat if allotted to me in case any of the above particulars are proved to be false.

Communication Address, if separate from the

Permanent Address.....

.....

.....

Signature of the candidate in full

NB: Documents to be submitted: ***(1) Marks-sheet and Certificate of HSLC and HSSLC(Sc.)***
(2) Admit Card of HSLC (3) PRC (4) Reserved Category/Categories Certificate(s) if any.