

SDPS WOMEN'S COLLEGE

♥ Khandwa Road, Indore№ 9754149007☑ enquiries@sdps.edu.inⓒ sdps.edu.in

Application Form

Session: 20__-__

Sr. No	
Fill In Block Letters:	
Name of the Candidate Ms. /Mrs. :	
Marital Status : Nationality: (Married/Unmarried)	Category:(ST/SC/OBC/GEN)
Family Income (Yearly)	Blood Group:
Father's/Husband's Name : Mr.	
Mother's Name : Mrs.	
Date of Birth (DD/MM/YYYY):	E-Mail ID :
*Permanent Address:	
City:	_ State :Pin Code :
Mobile No. (Student's):	Mobile No. (Father's):
Mobile No. (Mother's):	
*Temporary Address:	
City:State :	Pin Code : Phone No.:
*Student's Aadhar Card No. :	
*Student's SSSMID :	

Education:

Name of Examination	Year of Passing	Marks Obtained	% Obtained	Board / University	School / College Name	Major Subjects
10 th Class						
12 th Class						
Graduation						
Post Graduation						
Any other qualification						
Declaration:						

1 ost diadactor								
Any other qualification								
Declaration:								
Ihereby declare that the above mentioned statement is true in all respect. I understand that my admission is liable to be cancelled if the above information is found incorrect. I undertake to abide by all the rules and regulation of the College & University. I also understand that the fee once paid shall not be refunded. I acknowledge that the college reserves the right to cancel or withdraw my admission at any stage.								
Signature of Father:			Signature of	Signature of Candidate:				
Name:			Name:	Name:				
Signature of Mother:			Signature of	Signature of Guardian:				
Name:			Name:	Name:				
Place:		_						
Date:		_						