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## मानव संसाधन शिक्षण विकास परिषद COUNCIL OF HUMAN RESOURCE EDUCATION DEVELOPMENT

## STUDENT REGISTRATION FORM Paste a latest SESSION ..... Coloured photograph Of candidate and **Course Details** Attach 3 additional -----Year ------Course applied for ----Where did you find out about the courses at our Institute College-----copies also Branch ------ Why did you wish to this Course? -----**Personal Details** Name (Block Letters) (First Name) (Middle Name) (Last Name) E-mail ID. Landline NoMobile No Fathers Name (In Block Letters) **Mothers Name** (In Block Letters) Date of Birth Age. Permanent Address: --------State------Pin no.-------Pin no.-----Parent's Occupation ----------- Annual Income ------(Attach proof) ------- Male ------- Female------ Female------Nationality ----------- Category (Tick) General ------ SC------ST------Others-----Blood Group ----(Attach Proof) Local Guardian's Name & Address ------Please send completed application form along registration fee to The Admissions Office The Admission Office, Council of human resource education development, Head Office Vadodara FOR OFFICE USE ONLY Application received Date. \_\_\_\_\_ **STUDENT HALLMARK SLEEPS** Students Name \_\_\_ College Institute Name Course Applied For \_\_\_\_ Photograph Start Date \_\_ End Date \_\_\_ \_\_Sex\_\_ \_\_\_City\_\_\_\_ \_\_ State\_\_ Offer Decision - Unconditional \_Conditional \_ Reject \_ conditional or Rejection Please specify the condition or reason for rejection Registration no. Seat No.

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Sr. No	Examination	Name of Board /	year	Marks	% of Marks
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	Date of Birth Certificate.				
	Attested Certificates and Mark sheets Character Certificate	of Class X, XII and Graduation.			
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Mobile No

Landline No