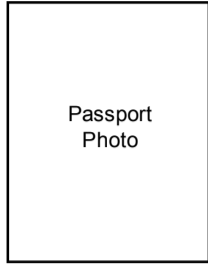


Sl. No.

ADMISSION FORM
DR. RADHAKRISHNAN SCHOOL
OF ARTS, COMMERCE & SCIENCE

A UNIT OF "DR. RADHAKRISHNAN SCHOOL OF ADVANCE STUDIES"
Amolapatty, Dibrugarh-1, Assam



Passport
Photo

If Class IX

- Basic
- Advance

If Science

- General Science
- Integrated Science

If Arts

- Arts Assamese Medium
- Arts English Medium

Commerce

-

1. Name of the Candidate (in Full & Capital Letter):

2. Father's Name.....

3. Mother's Name.....

4. Occupation of Parents.....

5. Permanent Address: Village/ Town.....

P.O.....District Pin.....State.....

Ph : (Parents) / Email

6. Communication Address: Village/Town.....

P.O.....District Pin.....State.....

Ph : (Parents) / Email

7. Date of Birth 8. Nationality.....

9. Caste..... 10. Sex:.....

11. Academic Records

Exam	Marks in the last exam	Special Distinction (if any)
Board/ Council	English	
	Mathematics	
Year of Passing	Science	
	Social Science	
School	Assamese /Beng./Hindi	
	Elect. Sub <input type="text"/>	
	Total Marks	
	Percentage	

Sl. No.

Date/2023

Received Admission form from

for Class IX Stream Arts Commerce General Science Integrated Science

Signature of Receiving Officer

12. **Subjects to be opted**

CLASS-IX	ENGLISH	MIL		GENERAL MATHS	GENERAL SCIENCE	SOCIAL STUDIES	ELECTIVE	
	ENGLISH	ASS	HINDI	GENERAL MATHS	GENERAL SCIENCE	SOCIAL STUDIES	ADV. MATHS	COM. SCIENCE

SCIENCE	ENGLISH	MIL/ ALTE	COMPULSORY SUBJECTS			Elective 1	
	ENGLISH		PHYSICS	CHEMISTRY	MATHEMATICS		

ARTS	ENGLISH	MIL/ ALTE	Elective 1	Elective 2	Elective 3	Elective 4
	ENGLISH					

COMMERCE	ENGLISH	MIL/ ALTE	COMPULSORY SUBJECTS		Elective 1	Elective 2
	ENGLISH		ACCOUNTANCY	BUSSINESS STUDIES	ECONOMICS	

13. **Hostel required :** Yes No (If yes collect Hostel Form)

14. **DECLARATION BY THE CANDIDATE**

I hereby declare that this form is filled by me and the information furnished herewith are true and correct to the best of my knowledge and belief. I shall abide by the Rules and Regulations of the School and any other regulatory authorities. I shall be liable to any disciplinary action in case of breach of these Rules and Regulations.

Place.....
Date.....

.....
Signature

15. **DECLARATION BY THE PARENTS / LOCAL GUARDIAN**

Having noted the rules regarding class attendance, payment of fees, conduct and behaviour of student etc. I hereby declare that I take full responsibilities of my son/daughter/ward/ Sri/Smt..... during the course of his/her study in the college.

Place.....
Date.....

.....
Signature of the Parent

.....
Signature of the local Guardian

Please bring this receipt at the time of Admission for smooth and convenient Admission process.