Be Ahead with Sustained Excellence

DISTANCE LEARNING PROGRAM(DLP)
APPLICATION FORM

KINDLY TICK (✓) THE PROGRAM YOU WISH TO ENROL

	I ST YEAR PU	II ND YEAR PU	CET, COMED-K
☐ IIT-JEE ACHIEVER	☐ PCM	☐ PCM	☐ PCM
☐ AIEEE PLUS	☐ PCB	☐ PCB	☐ PCB
☐ MEDICAL EXCEL	☐ PCMB	☐ PCMB	☐ PCMB
☐ FOUNDATION-SnT	**2 YEAR PU**	☐ ELECTRONICS	
☐ NTSE Winner	☐ PCM ☐ PCB ☐ PCMB	**2 ND PU + CET**	
		☐ PCM ☐ PCB ☐ PCMB	

Student's Name

E-mail ID

Date of birth D D M M Y Y Y Y

Male ☐ Female ☐

(Tick (✓) appropriate box)

Father's Name

Mother's Name

E-mail ID

Mobile 1 Mobile 2

Mailing address

City State Pin Phone no.

Institution studying (with location)

Syllabus State ☐ CBSE ☐ ICSE ☐ ISC ☐

Mode of Printed courseware delivery Collection at Office ☐ By Courier ☐

I agree to abide by the rules and regulations of the institution.

Signature of the Student/Parent/Guardian

Note : Fee once paid shall not be refunded or adjusted

For Office Use	
Registration No.	Receipt No. Date Amount
PROGRAM ENROLED	

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