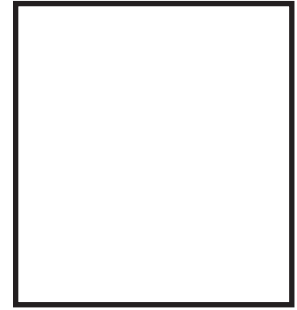


REGISTRATION FORM

COURSE - B.Ed / M.Ed



Name.....

Father's Name.....

Mother's Name.....

Address.....

.....

Contact.1..... 2.....

E-mail Id.....

Qualification.....

% in Qualifying Exam.

Course.....

Date..... Session.....

(Applicant Signature)

For Office Use

Amount.....Receipt No.....

Cash/Cheque No.....Date.....

Signature