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Shyampur, Rishikesh, Dehradun – 248001  
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### ADMISSION FORM

FOR OFFICE USE ONLY	
Admission Form No.	
Enrolment for Session	: 200 – 200
Registration No.	:
Enrollment No.	:

Affix recent  
passport  
size color photo

#### TO BE FILLED IN BY THE APPLICANT IN BLOCK LETTERS

Course Applied for  
(Tick the appropriate box)

B.Ed.

Name (In Block Letters)

\_\_\_\_\_

Date of Birth (DD/MM/YYYY)

\_\_\_\_\_

Gender

Male

Female

Father's Name

\_\_\_\_\_

Occupation

\_\_\_\_\_

Mother's Name

\_\_\_\_\_

Category

General  SC  ST  OBC  PH  FF  Other

Corresponding Address

\_\_\_\_\_

\_\_\_\_\_

Phones/Mobile

\_\_\_\_\_

Email

\_\_\_\_\_

Permanent Address

\_\_\_\_\_

\_\_\_\_\_

Phones/Mobile

\_\_\_\_\_

Email

\_\_\_\_\_

Hostel \* :

Required

Not Required

Transportation

Required

Not Required

\*Hostel facility is subject to availability and strictly on first come-first serve basis.

**Educational Qualification (Attach attested copies of proof of qualifications)**

<b>Examination Passed</b>	<b>Board/University</b>	<b>Year</b>	<b>Subjects</b>	<b>Percentage</b>
High School				
Intermediate				
Graduation				
Others				
Any Distinguished Achievements				

**DECLARATION**

1. The information and particulars given by me in this form are true, complete and correct to the best of my knowledge and belief. In the event of any information given by me is found to be false or incorrect, or any ineligibility detected before or after the admission, my admission is liable to be cancelled by the institute.
2. I will not damage the reputation of the institute and its property. I do hereby agree to pay the cost of damages caused by me to any movable or immovable property of the institute or hostel along with fine, due to my malafied, intentional or negligent working.
3. I am not suffering from any communicable/ infectious disease.
4. I have not been involved in any unlawful activities in the past and will not indulge during the course of studies at the institute.
5. I will remain respectful and obedient to the faculty and management.
6. I will follow the institute dress code of conducted and instruction issued from time to time.
7. I agree to pay the tuition fee and hostel charges on time.
8. I am aware that fee once paid is neither refundable nor adjustable.

**CERTIFICATION FROM THE FATHER/ GUARDIAN**

I \_\_\_\_\_ father/mother of Mr. / Ms. \_\_\_\_\_, who is candidate for admission to the institute, certify that I am bonafide guardian of the candidate. I assure that the candidate and shall abide by all the rules and regulations of the institute which are in vogue as well as those which may come into force later. I further assure that all the required fee will be paid in time and I am aware that the fee once paid by my ward is neither refundable nor adjustable.

\_\_\_\_\_  
**Signature of the Parent/Guardian**

\_\_\_\_\_  
**Signature of the Student**

**Date** \_\_\_\_\_

**Place** \_\_\_\_\_