



NAR BAHADUR BHANDARI GOVERNMENT COLLEGE TADONG
POST GRADUATE ADMISSION FORM 2021

Attach a
passport sized
photograph.

Sign Across

Do not Staple

Note: NBBGC, Tadong serves as extension center for Sikkim University for PG Courses. Please See details in the PG prospectus.

Please Fill up the details below in capital letters (except email-ID). All fields are Mandatory.

1. Candidate's Email ID:

2. Candidate's Mobile Number

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

3. Select Course (Tick ✓ next to course you are applying for)

Can only apply for one course in a single form

| | |
|-------------------|--|
| M.A. Economics | |
| M.A. English | |
| M.A. History | |
| M.Sc. Botany | |
| M.Sc. Chemistry | |
| M.Sc. Mathematics | |
| M.Sc. Physics | |
| M.Sc. Zoology | |

4. Candidate's Full Name:

5. Date of Birth:

| | | |
|----|----|------|
| DD | MM | YYYY |
|----|----|------|

 6. Gender:

7. Mother's Full Name:

8. Father's Full Name:

9. Contact No. of Parent

| | | | | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|

10. Category: Tick ✓ Next to applicable category. Write supporting document's serial no. below. Others may write serial no of photo ID they submit along with the application form (see prospectus & instruction page for details)

| | | | | | |
|---------|--------------------------|--------|--------------------------|--------|--------------------------|
| COI/SSC | <input type="checkbox"/> | RC | <input type="checkbox"/> | OTHERS | <input type="checkbox"/> |
| SI No. | <input type="text"/> | SI No. | <input type="text"/> | SI no. | <input type="text"/> |

11. Community: Tick ✓ Next to applicable category

| | | | | | | | | | |
|---------|--------------------------|---------------|--------------------------|-------------|--------------------------|----|--------------------------|----|--------------------------|
| General | <input type="checkbox"/> | OBC (Central) | <input type="checkbox"/> | OBC (State) | <input type="checkbox"/> | SC | <input type="checkbox"/> | ST | <input type="checkbox"/> |
|---------|--------------------------|---------------|--------------------------|-------------|--------------------------|----|--------------------------|----|--------------------------|

12. APL/ BPL (see instructions page/ prospectus for BPL):

13. Religion:

14. Nationality:

15. Differently Abled: Tick ✓ Next to applicable category

| | | | | | |
|-----|--------------------------|---------------------------------|----------------------|----|--------------------------|
| Yes | <input type="checkbox"/> | If yes percentage of Disability | <input type="text"/> | No | <input type="checkbox"/> |
|-----|--------------------------|---------------------------------|----------------------|----|--------------------------|

16. Name of Local Guardian:

17. Contact Number of the Local Guardian

| | | | | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|

18. If candidate Belongs to (Tick ✓ Next to applicable category): Urban Area Rural Area

19. PERMANENT ADDRESS:

| | |
|---------------------------|--|
| Address Line 1 | |
| Name of Village/Town/City | |
| District | |
| State | |
| PIN CODE | |

20. ADDRESS FOR CORRESPONDENCE:

| | |
|---------------------------|--|
| Address Line 1 | |
| Name of Village/Town/City | |
| District | |
| State | |
| PIN CODE | |

21. DETAILS OF QUALIFYING EXAMINATION:

| Name of Qualifying Examination: Tick ✓ below to applicable category. If other, write name of qualifying exam below it. | B.A. | B.Sc. | B. Com | Other |
|--|------|-------|--------|-------|
| Passed/ Appearing The qualifying examination | | | | |
| Name of College (in which the candidate studied the qualifying examination) | | | | |
| Name of University/ Board | | | | |
| C.G.P.A/ Percentage | | | | |

UNDERTAKING

I, son/daughter of
..... applying for the
course..... do hereby declare that the information I have
provided in the application form are complete and true to the best of my
knowledge. I understand that my application will be rejected if the information I
have provided is incomplete or if any discrepancies are found during verification.

Place:

Date:

Signature of the candidate

Name:

ACKNOWLEDGEMENT SLIP 2021-22

Name:

Application Number.....

Course Applied for :

Mobile Number:

FEE (TICK): Paid [] Unpaid [] Amount:

Documents Submitted:

1. Marksheets of last qualifying exam

| 1 st Sem / 1 st year | 2 nd Sem / 2 nd year | 3 rd Sem/ 3 rd year | 4 th Sem | 5 th Sem | 6 th Sem |
|--|--|---|---------------------|---------------------|---------------------|
| | | | | | |

2. Degree Certificate

3. COI/SSC/RC of the candidate or his/her Father duly attested by competent authority as per Govt of Sikkim notification.

4. Class XII Mark sheet and Certificate (Attested Copy/self-attested)

5. Class X Mark sheet and Certificate (Attested Copy/self-attested)

6. Category Certificate (OBC, ST, SC, etc.) (Attested Copy/ Self Attested)

7. AADHAR card (optional)

8. Photo identity proof

9. BPL card issued by D.E.S.M.E (if applicable)

10. PwD certificate issued by competent authority (if applicable) (Duly attested by the competent authority) (one copy)

11. Fee receipt.

Received By

Candidate's Signature

Date:

Date: