

Sophia Shree Basant Kumar Somani Memorial Polytechnic

Sophia Campus, Bhulabhai Desai Road, Mumbai - 400 026

ADMISSION FORM

				App	lica	tion No.		
P	lease Complete this	form in BLOCK LETTERS						
N	IAME OF THE CO	DURSE						
Р	ERSONAL DETAII							
1.								
		Name Father's Name Mother's						
2.	Date of Birth :	Day Month Year						
3.	Nationality _							
4.	Marital Status	<u>:</u>						
5.	Religion	:						
	classified as b	of scheduled caste/schedule tribe/community ackward class, tick off the oppropriate colun supporting State Goverment certifiacte.		NT DT C	Othe	-		
6.		idential address of parent/husband :						
		Phone :						
7.		Father's/husband's occupation/designation : Phone :						
8.	Name of fathe	er's/husband's organisation and address :						
		Phone :						
9.	Father's/husb	and's income :						
10.	. Mother's occu	pation/desigation :						
			Pho	one :				
11.		ner's organisation and address : 						
12.		ne :						
13.		Candidate's Mumbai address :						
	Email : Mobile							
14.	. Candidate's pe	rmanent address :						
			Pho	ne :				
		ACADEMIC QUALIFICATIONS		I				
	Examination	Name and Address of School / College University / Institution	Year of Passing	Marks Obtained/ Out of	%	Class/ Division		
	SSC/ICSE/Std. X	Name ;						
١,	HSC /STD YII	Name ;						

ACADEMIC QUALIFICATIONS							
Examination	Name and Address of School / College University / Institution	-	Marks Obtained/ Out of	%	Class/ Division		
SSC/ICSE/Std. X	Name ; Address :						
H.S.C. / STD XII	Name ; Address :						
Bachelors' Degree	Name ; Address :						
Post Graduate	Name ; Address :						

Candidates must complete details required overleaf

Mar LAN	k GUAGE PROFICIENCY	Read	Write	Speak			
Engl	lish Ii						
1 11111	A I						
Any	onal Language (Specify) other						
	CIAL ACHIEVEMENTS						
ACA	DEMIC ;						
EXTR	RA CURRICULAR :						
PUE	CIAL INTERESTS BBIES;						
	,	••••••	••••••				
1.	JRSE PARTICULARS	so at this Institutio	on hoforo 2 Vos	No. If Vos			
1.	Have you taken any Course at this Institution before ? Yes						
	1		Year :				
	2		Year :				
2.	Have you applied for any other course in this institute or elsewhere this year ? Yes No If yes, name them :						
	1.						
	2. 3.						
	.						
3.	Is hostel accommodation reseparate hostel form.	needed ? YesN	o(Please tick) If Yes,	please fill in a			
Atte: I) M ii) C	ASE ATTACH TO YOUR APP sted photocopies of certificat lark Sheet of qualifying exam ertificates: School Leaving C experience or Training, with no the form has to be handed in	es in support of the for course selecter the firms of certificate, Certificate, came of establishments.	he information supplied ted ates of Additional Qua nent, institution, nature	lifications, Work e of duties, duration,.			
	I hereby certify that the ak vledge. I agree to abide by th those which may be formulate	he Rules and Regi		,			
	Date		Signature of Applica	ınt			
	Admission is not confirmed until the fees are paid.						
	For Office Use Only :		Reg. Fees paid on				
	Interviewed on :		Adm./Not Adm./W.I	Sign			
	Admission finalised on :		Sig. Director				
	1st Term Fees pd. on		Sig. of Cashier				
	2nd Term Fees pd. on.:		Sig. of Cashier				