APPLICATION FORM FOR APPEARING IN THE COMMON ENTRANCE TEST FOR ADMISSION TO THE B.ED PROGRAMME OF DIBRUGARH UNIVERSITY SESSION: 2014-2015

A printed copy of the completed form shall have to be submitted to the B. Ed CET Cell, DU, Education Department, Dibrugarh University / College/Institution on or before 16.05.2014

Sl. No.

Affix Passport Size Photograph



Dibrugarh 786 004

in Full (Block letters):	Surname	Nam	e	Middle Name	
Mr./Mrs./Ms.					
Address for Corresponde	ence :				
			PIN	N	
Mobile/ Tel.(with STD Code)		E.mai	i1		
Father's Name :					
Father's/Guardian's (if fa					
Name		_ Occupation			
Address					
		PIN _			
Telephone No (with STI	O Code)	E.mail			
Mother's Name :					
	ay	Month	Year		
(According to the					
HSLC Certificate)					
Nationality :					
Sex : (Please tick)	Male	Female			
Community (Please tick)): SC S	ST(P)	ST(H)	OBC/MOBO	
	General]		J [
(Attach Certificate in cas	se of SC/ST/OBC/I	MOBC)			
Whether physically disa	bled?		YES	NO	
(If yes, please state the nature	e of the disability and a	ttach Medical Ce	ertificate	<u> </u>	
issued by the Joint Director of	f Health Services of th	e District concern	ned)		

11.	Whether	r employed in a Se	condary So	chool recogn	ized	YES	NO
	up to 10th standard by the SEBA?						
	(If Yes , p	roduce Experience Cer	tificate from	the Employer	concerned)		
12.	Education	onal Qualification					
	nination issed	University	Roll No.	Year of Passing	Div/ Class	Percentage of Marks	Subject(s) taken
	t Degree +2+3)						
-	ster's egree						
13.	would li	n which the candid ke to appear (Pleas ist of Examination - 2014)	se				
14.	Particula	ars of submission o	of fees for	the Common	Entrance 7	Γest (CET):	
	at any t	oranch of State B	ank of In	dia in the A	Account No	o 3296196949 0	nould be deposited 6 through BANK versity website:
	I	Note : No Cheque	, Draft or	Cash shall b	e accepted	l	
	(a) Bank	c Challan Journal N	No.:				
	(b) Amo	ount	:				
	(c) Bank	Challan Date	:	d m	m y y	y y	
	elief and i		ound to be	incorrect, m	y admissio	on shall be cance	of my knowledge elled and I shall be
Date :						Signature	e of the candidate

Place:

COMMON ENTRANCE TEST FOR ADMISSION TO B.Ed. PROGRAMME OF DIBRUGARH UNIVERSITY, SESSION: 2014-2015

ATTENDANCE-SLIP FOR USE AT THE TEST CENTRE

(TO BE KEPT WITH OFFICER IN-CHARGE OF CENTRE) FOR USE ON THE DAY OF EXAMINATION

	Sl. No.	Affix			
NAME		Passport			
ROLL NO.: 1 4		Size			
		photograph			
DATE OF TEST: 08.06.2014	1				
TIMING		SIGNATURE OF THE CANDIDATE			
44.00 A.M. T. 40.00 D.M.	(to be signed at the ti	me of examination)			
11.00 A.M. To 12.30 P.M.					
Signature of the Candidate	Signature of O	officer-in-charge			
×					
	RSITY, SESSION: 2014-20 lission Card Sl. No.				
	ROLL NO.: 1 4				
Test Centre					
Place of Test	Affix				
Name of the Candidate	Passport				
Father's/Mother's Name		Size			
Address for Correspondence		photograph			
PIN PIN		-			
Data of Tost • 08 06 2014	Time : 11:00 A M +	- 12.20 D M			