

# AMITY INSTITUTE OF EDUCATION

An Institution of Ritnand Balved Education Foundation (RBEF)

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**Affiliated to Guru Gobind Singh Indraprastha University (GGSIPU), Delhi**

## Application form for Management Seats for B.Ed Programme of Amity Institute of Education for the Academic session 2011-12

Affix Photograph

1. Name of the programme applied for B.Ed.

2. GGSIPU CET ROLL NO. \_\_\_\_\_

3. GGSIPU CET RANK \_\_\_\_\_

4. CANDIDATE'S 1<sup>st</sup> NAME (in capitals)

MIDDLE NAME

SURNAME

5. NAME OF FATHER (in capitals)

MIDDLE NAME

SURNAME

6. NAME OF MOTHER (in capitals)

MIDDLE NAME

SURNAME

7. COMPLETE POSTAL ADDRESS (in capitals) (Do not repeat name)

STATE

PIN CODE

TELEPHONE/MOBILE

E-MAIL .....

8. DATE OF BIRTH (in Christian era)

DAY

MONTH

YEAR

9. SEX (Tick / in appropriate box)

M

F

10 CATEGORY(GEN./OBC/SC/ST/OTHERS) \_\_\_\_\_(Please specify if OTHERS)

**11. DECLARATION**

I hereby solemnly and sincerely affirm that I fulfil the eligibility conditions prescribed by the GGS IP University and that the statements made and information furnished by me in this application form are true and correct. Also I have not withheld any information. If it is found that any information furnished herein is fraudulent, incorrect or untrue in material particulars, I realize that I am liable to prosecution and that the admission to the programme is liable to be cancelled.

Date \_\_\_\_\_

Signature of the Candidate \_\_\_\_\_

I have carefully read and verified the information furnished by me as parent and by my son/daughter/ward and affirm that it is true and correct.

Date \_\_\_\_\_

Signature of the Father/Mother \_\_\_\_\_

**12. DETAILS OF EXAMINATIONS PASSED (Starting from 10<sup>th</sup> Class)**

Examination	Board / University	Roll No.	Year	Name / Address of School Institution attended	% of marks in each subject (upto 2 decimal)
10 <sup>th</sup>					
12 <sup>th</sup>					
Diploma					
Graduation					
Others					

I hereby certify that the information furnished by Mr./Ms. .... is correct as per schools/college records/testimonials produced before me.

Date :                      Signature of Principal/Head of Institution last attended/Gazetted Officer