



RAM PRATAP INSTITUTE OF HIGHER EDUCATION

Add.: - Vill.- Ghujji, PO+PS- Sherghati, Gaya, Bihar- 824211

Recognized by: - Health Dept., Govt. Of Bihar

Affiliated to: - Bihar University of Health Sciences, Mithapur, Patna, (Bihar)

Contact No. – 93044022761, 8825291311, 9153436576, 7765976999

Admission Form

Course- GNM, Session- _____

Admin. No. _____

Roll No. - _____

Admin. Date _____

(All Details must be fill in CAPITAL Letter)

Student's Name: - _____, Mob. No. _____

D.O.B- _____, Gender : - Male Female Category: - _____

Email id : - _____

Aadhar No. - _____

Father's Name : - _____, Mob. No. _____

Mother's Name : - _____, Mob. No. _____

Address (According to Aadhar): - _____

Educational Qualification: -

Sr. No.	Exam Name	Passing Year	Board / Univ.	Full Marks	Marks Obtained	Percentage	Div./ Grade
1	Matric						
2	Inter						
3	Graduation						

Declaration: - All information are given by me is true and best of my knowledge. If any information will found wrong then I'll responsible.

Student's Signature

Parent's Signature

Admin. In-charge Sign. With seal

For Office Use

Student's Name _____, D/O _____

D.O.B. _____, Course _____, Session _____, Admin. No. _____

Admin. Date _____, Mob. No. _____

Address: - _____

Institute Seal

Admin. In-charge Sign.