

# SERAMPORE COLLEGE

*Add-on Course on: Dietetics*

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## ENROLLMENT FORM (Session: 2022- 2023)

SL NO:

Name.....

Father's Name/Guardian's Name: .....

Gender..... Age..... Date of Birth.....

Belongs to: Gen / SC / ST / OBC A / OBC B / PC/ Others .....

Mailing Address.....

Mobile No. .... Email.....

Class ..... Roll ..... Year of Admission: .....

CU Reg. Number ..... Aadhar card number .....

Subject 1: ..... Subject 2: ..... Subject 3: .....

% Of Marks in HS (10+2)..... % of Marks in Biology (10+2).....

I wish to participate in the Add-on Course on 'Dietetics' from ..... to .....

because .....

I am also participating/ participated in other Add-on Course on .....

### Declaration :

I....., hereby declare that all statements made in the application are true and correct. I will comply with the rules and regulations for the entire training and agree to maintain proper discipline during the programme. I understand that, 100% attendance in classes is compulsory and I commit myself to adhere to the same. I also understand, I have to attend all the classes on time. I agree that the college may terminate my participation at any time during the training program for failure to maintain discipline, harmony and welfare of the institution.

Date :

Place :

(Signature of Applicant)

### FOR OFFICE USE ONLY

Application of ..... is recommended/ not accepted for admission on and from ..... to ..... for the Add-on Course on Dietetics.