FORM NO.: A-1

ARUNACHAL PRADESH
STATE COUNCIL FOR TECHNICAL EDUCATION
(Under the Directorate of Higher and Technical Education)

To be filled by the Council		Please paste your recent photograph
Registration No:		
Roll No:		

1 **Name of the Institution** : Government Polytechnic College, Ziro

2 **Name of the student (In BLOCK LETTERS)** :

3 **Sex** : Male ☐ Female ☐

4 **Caste/Tribe** : _____

5 **Date of Birth** :

D	D	M	M	Y	Y	Y	Y

6 **Mother's Name** :

7 **Father's Name** :

8 **Permanent Address** :
Village/Town:_____ PO:_____
PS: _____ District: _____
PIN:_____ State: _____
Ph:_____

9 **Details of qualifying exam passed:**

Class	Year of passing	Name of the board	Roll. No.	Sl. No. of marksheet	Percentage of marks

10 Details of Qualification, if any, higher than that mentioned at Sr. No. 9

Class	Year of passing	Name of the board	Roll. No.	Sl. No. of marksheet	Percentage of marks

11 **Name and address of the Institution last attended** : _____
_____

12 **Year of leaving the Institution last attended** : _____

13 **Program in which admitted** : _____

Note: 1. Pasted photograph to be attested by the Principal.
2. One additional photograph to be enclosed along with the form.

Date:

Signature of the student

Counter signature of the Principal with seal