

19. Academic Details

Examination	Roll Number	Percentage ONLY	Subjects Taken	Name of Board/University	Month / Year of passing
10+2	<input type="text"/>	<input type="text"/> . <input type="text"/>		<input type="text"/> <input type="text"/>
Graduation	<input type="text"/>	<input type="text"/> . <input type="text"/>		<input type="text"/> <input type="text"/>
Post Graduation	<input type="text"/>	<input type="text"/> . <input type="text"/>		<input type="text"/> <input type="text"/>
GATE/Any other examination passed (Percentile Only)	<input type="text"/>	<input type="text"/> . <input type="text"/>		<input type="text"/> <input type="text"/>

UNDERTAKING

I S/o, D/o Shri
 age year Month R/o

District State hereby declare / certify that the above information is true to the best of my knowledge and belief and nothing has been concealed therein. I am fully aware of the fact that if the information given by me proves to be wrong, I will be punished under law and I will expelled from the institution where I had got admission on the basis of the false information.

Dated :

Signature of the Candidate