Please submit application form photocopied on both sides of the sheet in A-4 size Only

TELECOM CARE
An ISO 9001:2015 Certified.
Mobile Repairing Training Institute

TELECOM CARE INSTITUTE

(An Autonomous Institution Registered under MSME, Govt. Of India, An ISO 9001:2015 Certified)

Head Office : 114/4/3 S.N Majumder Road, Tribeni, Hooghly District, West Bengal

EXAMINATION FORM

1. Session .....
2. Semester .....
3. Reg. No. ☐☐☐☐☐☐☐☐
4. Category ST ☐ SC ☐ OBC ☐ Other ☐
5. Name of Candidate ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
6. Father's Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
7. Date of Birth ☐☐☐☐☐☐
8. Candidate Roll Number : _____
9. Course Name .....

   Course Medium Hindi ☐ Bengali ☐
10. Paper Appearing in I ^{t}-Semester/ II$^{'d}$-Semester

First Semester

S.No.	Paper's Name
1	
2	
3	
4	
5	
6	

Second Semester

S.No.	Paper's Name
1	
2	
3	
4	
5	
6	

DECLARATION

(To be filled in by the candidate)

I wish to appear in the class/course _____examination of _____month, Year _____of the TELECOM CARE. have been carefully go through the rules and regulation, and I promise to abide by them. I assure you that I have filled all the information in the form true to the best of my knowledge and belief. I shall be responsible for the consequences if the information filled by me is incorrect. I know that hereafter no changes shall be made in the subjects and place of examination.

Place : _____

Date : _____ Candidate's Signature