

West Bengal Board of Primary Education



D.EL.ED. ADMISSION FORM, SESSION: 2025-2027

BISHNUPUR MALLABHUM B.ED. COLLEGE

A B.Ed. & D.El.Ed. College

MAYRAPUKUR, GOSSAINPUR, BISHNUPUR, BANKURA, 722122



Application

No/Application

ID.....

Name of the applicant.....

Father's name:.....

Mother's name:.....

Guardian's name(In the absence of parents):.....

Date of Birth (DD/MM/YY):..... Category:.....

Ageason-01.07.2025.....Year.....Month.....Days

Sex:..... Marital Status:- Married ☐ Unmarried ☐

Full permanent postal address of the applicant: -

Vill:-.....P.O:-.....

P.S:-.....Dist:-.....PIN:-.....

Contact Number :-

Student Contact Number:.....Guardian Contact Number.....

Email ID:.....Aadhaar No:.....

Educational Qualification:-

Name of the Examination	Name of the Council/Board	Name of the Institute	Year of passing	Marks obtained	%of the total mark obtained
H.S.					

Declaration

I do hereby declare that all the above statements are true to the best of my knowledge & belief. My candidature will liable to be cancelled if there is any false or incorrect information. I promise That I shall pay in full all the fees just after admission.

Date:-

Place:-

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Candidate's signature

Course Fees Collector Name

Signature of Principal/H.O.D

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