

# District Institute of Education and Training,

Science

Bhagalpur

Arts

Counselling Form

Name.....Father's Name.....

Application No.....3rd Provisional Merit List No.....

Category..... Mobile No.....

Sl. No.	Description of Certificate	Submitted		Remarks
		Yes	No	
1	Self attested Xerox copies of Matriculation Marks sheet and Original Certificate.			
2	Self attested Xerox copies of Inter Marks sheet and Original Certificate.			
3	Self attested Xerox copy of Caste Certificate from Competent Authority.			
4	Self attested Xerox copy of Residential Certificate from Competent Authority.			
5	Self attested Xerox copy of Income Certificate from Competent Authority.			
6	Self attested Xerox copy of Economic Weaker Section Income Certificate duly issued as per rule by competent authority.			
7	Self attested Xerox copy of Disability Certificate issued from Competent Authority.			

Signature of Student with date

Signature of Counselling Member

Affidavit on

100/Rupees Non Judicial Stamp

**Affidavit**

I,.....S/O/D/O.....  
.....Resident of .....  
.....  
.....

I do hereby solemnly affirm and declare an oath for D.El.Ed. Admission as follows:-

1. That my original Mark-sheet and original Matriculation certificate and inter level Mark-sheet & Certificate submitted is true and correct.
2. That the aforesaid certificate of Academic Qualification Submitted is true and correct believe.
3. That the caste certificate (if applicable) and residential certificate submitted is true and correct.
4. That disability certificate (if applicable) submitted is true and correct.
5. That the above statements are true to the best of my knowledge and belief.
6. That I will ensure that 80% attendance in theory classes and 90% in internship (Practicum) must be fulfilled. If failing the criteria, I will not be sent up for ensuring the final examination.

If any of the above submitted certificates is found false/fake, the disciplinary legal action will be taken by the Institute authority against me.

Identified by:-

Deponent.