



# CATALYST CLASSES



## Admission Form

Name of the candidate: \_\_\_\_\_

Father's name \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender:- Male/Female

Class/Highest Qualification:- \_\_\_\_\_

Residing Address:- \_\_\_\_\_

Permanent Address:- \_\_\_\_\_

Contact No. \_\_\_\_\_

Course Opted For: \_\_\_\_\_

\_\_\_\_\_

Photo

### Declaration by the Candidate.

I do hereby declare that all the particulars stated in this admission form are true to the best of my knowledge.

**Note:** Fees once paid will not be refunded in any circumstance.

Date Of admission:

Place:

Signature of Candidate

For official Use Only

Advance Payment \_\_\_\_\_

Remarks: \_\_\_\_\_

In-Charge-Sign