



**10 Educational Qualifications**

Level	Name of College	Name of Board / Univ.	Subjects	Year Of Passing	Marks Obtain	%age	Div
10th							
12th							
Grad-uation							
P.G.							
Others							

**11 D.D. No.**  **Amount Rs.**  **Dated**

**Bank Name**

**12 Declaration of Candidate:**

(a) I hereby declare that information furnished above are correct and best to my belief. I shall be liable for expulsion from the college / legal action, in case any of them is proved to be false or forged at any stage of my stay in the college.

(b) I further declare that in the event of my being admitted to the college, I shall abide by all the rules and regulations of the college.

**Place** \_\_\_\_\_

**Date**

\_\_\_\_\_  
***Full Signature of the Candidate***

**DECLARATION BY THE FATHER / GUARDIAN**

I, ..... Declare that in the event of Mrs./Ms./Mr. .... Being admitted to the TIHS, I shall be responsible for her / his conduct and undertake to pay all fees and charges of the college.

**Place** \_\_\_\_\_

**Date**

\_\_\_\_\_  
***Signature of the Parent / Guardian***

Please note that Application Form must be submitted along with Demand Draft in favour of "Tapindu Institute of Higher Studies" payable at Patna.  
For draft details contact TIHS.

# TAPINDU INSTITUTE OF HIGHER STUDIES (TIHS)

SAGUNA MORE, CANTT. ROAD, KHAGAUL, PATNA - 801105

Phone: 0612 - 3247636, 3204648



## ADMIT CARD

*(Office Copy)*

### Particulars To Be Filled In By The Candidate *(Except Roll No)*

<i>Affix Your Recent Passport Size Photograph Duly Signed By The Candidate</i>	<b>1 Roll Number</b>	<input type="text"/>
	<b>2 Candidate's Full Name In English</b>	<input type="text"/>
	<b>3 Father's Full Name In English</b>	<input type="text"/>
	<b>4 Identification Mark</b>	<input type="text"/>
	<b>5 Signature Of The Candidate <i>(In Full)</i></b>	<input type="text"/>

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## ADMIT CARD

*(Particulars To Be Filled In By The Office)*

### Admit The Candidates Bearing

<i>Affix Your Recent Passport Size Photograph Duly Signed By The Candidate</i>	<b>1 Roll Number</b>	<input type="text"/>
	<b>2 Date Of Examination</b>	<input type="text"/> / <input type="text"/> / <input type="text"/> At <input type="text"/> : <input type="text"/> <input type="text"/>
		<b>Signature Of The Examination Controller</b>
		<b>(To Be Filled In By The Candidate)</b>
<i>(Full Signature Of The Candidate To Be Signed In The Examination Hall Before Invigilator Of The Examination)</i>	<b>3 Candidate's Full Name In English</b>	<input type="text"/>
	<b>4 Father's Full Name In English</b>	<input type="text"/>
	<b>5 Signature Of The Candidate <i>(In Full)</i></b>	<input type="text"/>