



R.D. Memorial College of Physical Education

BARKHEDI KALAN, BHADBHADA ROAD, BHOPAL – 462044
 Office: Barkhedi Kalan, Bhadbhada Road, Bhopal, Phone: 0755-2696776, Fax: 2696776

Affix Recent
 Passport Size
 Photograph here

BPEd & MPed ADMISSION FORM 2013-2014

(a) Name of the Course

(b) Name of the Student (Capital letters)

(c) Father's Name

(d) Mother's Name

(e) Date of Birth

(f) Age on 1st July 2013

(f) Nationality

(g) Category GEN OBC SC ST

(Please tick on appropriate Box & for reserve categories attach certificate issued from competent authority)

(h) Present Address

(i) Permanent Address

(j) Phone No. with code

(k) Mobile No. (If any)

(Any change to be intimated to the office)

Educational Qualification

| Examination | University/College | Subject | Year of Passing | Total Marks Obtained | Percentage/Grade |
|-------------|--------------------|---------|-----------------|----------------------|------------------|
| 10+2 | | | | | |
| Graduation | | | | | |
| BPEd/BPE | | | | | |

- List of Enclosures:**
1. 10th Certificate
 2. 12 Mark – Sheet
 3. Graduation
 4. B.P.Ed./B.P.E.
 5. Caste Certificate
 6. Medical Certificate

Declaration: I solemnly declare that:

1. The forgoing information is complete and correct.
2. I have never been disqualified from appearing in any University/Board examination.
3. I have never been prosecuted/detained/fined/convicted by the court of Law for any offence.
- 4.

Signature of Father/Mother/Guardian Signature of Applicant
 Name of Father/Mother/Guardian Name of Applicant

Place: - Place:-
 Date: - Date:-