

Admission Form

Bihar Acupressure Yoga College

Narayan Bhawan, East Lohanipur
Patna - 800 003

Form No.:-.....

1. Name in full (Block Letters) :-
2. Father's / Husband's Name :-
3. Date of Birth :-
4. Qualification :-
5. Course to which admission is sought :-
6. Permanent Address :-
7. Correspondence Address :-.....

Photo

DECLARATION OF THE APPLICANT

The contents of the Admission form that I have submitted are true to the best of my knowledge. If any statement given by me as above is proved to be false, I will be responsible and liable to be punished I have filled the Admission Form in my own handwriting.

(Signature of the Applicant)

For Office Use Only

Accepted / Rejected

Admission Roll No.

Office Incharge

Principal/Course Director
Admission incharge

Dated :-

Seal