

# HEMNALINI MEMORIAL COLLEGE OF ENGINEERING

## ADMISSION FORM 20 -20

STUDENT'S INFORMATION				
Session		Religion		
Enrollment No		Guardians Relation		
College Name	<b>343 / 343/HEMNALINI MEMORIAL COLLEGE OF ENGINEERING</b>	DOB		
Course		Nationality		
Stream		Sex		
Student Name		Category		Signature
Father's Name		Blood Group		
Mother's Name		Guardians Name		
Guardian Address		Guardians Mobile No		
<b>Student's Contact Details</b>				
Residential Status		Student Mobile		
Address				
State		PIN		
Passport No		Passport Valid Up to		
Visa Type		Student Email		
<b>Student's Educational Details</b>				
Examination	Board/council	Institute name/School Name	DGPA/CGPA	Marks Obtained
<b>10<sup>th</sup></b>				
<b>12<sup>th</sup></b>				
<b>Diploma</b>				
<b>Graduation</b>				