





# A.S. FIRE ENGG. & SAFETY MANAGEMENT INSTITUTE

is Part of Bhabha University, Parel Road, Dhuleth, Maharashtra, Mumbai City- 400001 (Pg.)

Mobile - 9822555495, 9790497991

## ADMISSION FORM



To  
The Principal/Director

I hereby apply for the admission to course \_\_\_\_\_  
of your college for the current academic year \_\_\_\_\_

Student's Full Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

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

State No. \_\_\_\_\_ Mob. \_\_\_\_\_ Sex: Male/Female

Date of Birth: / / Place of Birth: \_\_\_\_\_ Blood Group: \_\_\_\_\_

Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_ Caste: \_\_\_\_\_ Category of Caste: \_\_\_\_\_

### ACADEMIC QUALIFICATION

Exam	Board/University	Year	Roll No.	Total	Percentage
H.S.C.					
B.S.C.					
Graduate(s)					
Other					

Whether Hostel Facility Required: Yes/No Hobbies: \_\_\_\_\_

Extra Curricular Activities: \_\_\_\_\_

I hereby declare that all the above information is true to the best of my knowledge & belief & if found incorrect the institute may cancel my admission.

I have read all the rules & regulation laid by the institution & abide-

Thanking you, \_\_\_\_\_  
Your Ourselves

Parent/Guardian Sign: \_\_\_\_\_

Date & Place: \_\_\_\_\_ (Student Sign)

### FOR OFFICE USE ONLY

Admission sought for the course granted or rejected: \_\_\_\_\_

Fees Details: Rs. \_\_\_\_\_ (Part payment / Full Payment)

Receipts: Amount cash / DD/Cheque \_\_\_\_\_ Date: / /

Authorized Signature \_\_\_\_\_ Director / Principal