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GYANSHETRA ENROLLMENT FORM

Student Name:

Father Name: Mother Name:

Mobile no: Alternative Mobile no:

Email ID:

Address:

.....

Board Name: CBSE ISC Others, Please specify.....

Coaching Institute Name:

State Domicile:

School Name & Place:

Gender: - Male Female

Category: - GEN OBC SC ST PHD

Course:- MBBS B.Tech BDS

Date:
.....

Signature:
.....

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