Serial No.	Admission Registration No.			FORM - A
	Admission Registration No.			
	DUADATIVA VII	NVA DUAVAN	-	



BHARATIYA VIDYA BHAVAN

Bhavan's H.B. College of Communication and Management, Race Course Road, Bengaluru - 560 001 and MANASA EDUCATIONAL FOUNDATION FOR MENTAL HEALTH

Vinodini building, 1st cross, Park Extension,

Vinodini building, 1st cross, Park Extension, Near Mallikarjun Talkies, Durgigudi, Shivamogga-577201



Stamp Size Photo

To be Attersted by Gazetted Officer

APPLICATION FOR ADMISSION TO DIPLOMA IN COUNSELLING

(Note: Candidates are advised to read the Website before filling the application Incomplete applications are liable for rejection)

Program Title	(Abbreviated):	Program Code:				
1. Name of t (In Block I	the Applicant etters)						
2. Father's I	Name						
3. Mother's	Name						
3. Address fo	or Communicat	ion					
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E-mail:							
Mob:			Office				
Whatsap	p No.		Residence				
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SSLC/ Eq Documen	t acceptable by	(As entered in nation Certificate/ Court of law or age to be enclosed.	Place Year Month Date				
	y / Domicile		6. Sex: Male Female Others				
	and University examination is	from which the passed					
8 Qualifying Examination		Montl of Pas	ch & Year Class Percentage				
9. Occupation	on						
10. Admission Registration details :							
Payment Date	Amount	Mode of Paymen	ut UTR/UTI No. (Transaction ID)				
		G.Pay Phonepe Paytm UPI	I Others				
Admission recommended by							
1. BVB Blore		5. Ms. Rekha, Solapur	r				
2. Mr. Shivanand	a Nayak, Blore	6. Dr. Shwetha, Manga	alore				
3. Ms. Nagashri, Mysuru 7. Manasa, Shiv							
4. Dr. Lancy D S	ouza, Mysuru	8. Any other	Date: Signature of the Applicant				

DECLARATION

I hereby solemnly and sincerely affirm that statement made and information furnished in the application submitted by me are true. Should it however be found that the information furnished therein is not actually true, I know that I am liable for prosecution and forfeiture of the admission.

Serial N	lo.		Sign of Ball Sign		Bha		I.B. Colle	RATIYA VIDYA BH ege of Communicatio urse Road, Bengaluru and	n and Management,	COUND STATE OF THE POWNER OF T	FORM - B
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Certified xerox copies of marks cards of ALL PREVIOUS exams to be enclosed and attested by Gazetted Officer

Date: Signature of the Candidate Academic Director

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Certified xerox copies of marks cards of ALL PREVIOUS exams to be enclosed and attested by Gazetted Officer

Signature of the Candidate

Academic Director

Date:

	and AL FOUNDATION FOR MENTA Iding, 1st cross, Park Extension,	L HEALTH	SHIMOGA"	
Near Mallikarjun T	alkies, Durgigudi, Shivamogga-57	7201		
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Please sign on both dotted lines			7 100.0	
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Admission Registration No.

INSTUCTIONS TO THE CANDIDATE

- Candidates should read the instructions in the Website before filling this card.
- ♦ DO NOT fill Admission Registration Number and year in boxes.
- This card will be returned with official seal and Admission Reg. Number after which this should be retained till course is complete.
- The Registration Number given in this card will have to be quoted in every future reference and correspondence
- This card should be produced for any official clarification and for examination purpose.
- This card should be produced at the centre of Orientation Programme Contact programme, Practical assignment centre

FOR OFFICE USE

*	Date of Registration
*	Admission approved
*	Remarks
*	Study Centre if any
	Name
	Office Seal &
	Co-ordinator's Signature

Academic Director