



OFFLINE | LIVE | HYBRID

LOCATION:  
BELOW DOMINOS PIZZA, TANDA ROAD, NEAR DOABA CHOWK,  
JALANDHAR CITY (Pb)

**98 765 765 98**

OFFLINE

LIVE

HYBRID

# ADMISSION FORM FOR OFFLINE, LIVE/ONLINE & HYBRID COURSES ENGINEERING AND MEDICAL ASPIRANTS

FILL IN THE DETAILS OF COURSE YOU WISH TO JOIN

### SELECT YOUR STREAM

- Medical
- Engineering
- Others (.....)

### SELECT COURSE TYPE

- Regular Offline Classroom Course
- Hybrid Course
- Crash Course
- Live/Online Course

### SELECT COURSE DURATION

- Two Years Classroom Course  
(for students moving/studying in XI)
- One Years Classroom Course  
(for students moving/studying in XII)
- Capsule Course  
(for students moving/studying in XII)
- Target Course for Droppers  
(for students who have passed XII)

### POSTAL COURSES

- Two Years Study Package  
(for students moving/studying in XI)
- One Years Study Package  
(for students moving/studying in XII)
- Capsule course/Test series  
(for students studying in XII and completed their syllabus at board level)
- Target Course + Test series.  
(for droppers)
- Crash Course + Test Series  
(for XII appearance/droppers)

To,  
Candid Institute.  
Jalandhar City.

Please give me admission to the course selected (tick marked) above. I have gone through all the 'term conditions' of the institute mentioned on page number 2. I accept all the 'terms and conditions' and assure that I will abide by all the terms and conditions. My particulars are as follows:

Please fill the form in CAPITAL LETTERS

**NOTE**  
PLEASE READ THE TERMS AND CONDITIONS CAREFULLY BEFORE FILLING THE FORM.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Father's/Guardian's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Father's Occupation \_\_\_\_\_ Mother's Occupation \_\_\_\_\_

Date of birth: \_\_\_\_\_ Gender:  Male  Female  Category  SC  ST  OBC  PHC

Blood Group \_\_\_\_\_ Permanent Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ City: \_\_\_\_\_ Pin code \_\_\_\_\_

Correspondance Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ City: \_\_\_\_\_ Pin code \_\_\_\_\_

Phone \_\_\_\_\_ Personal Mobile \_\_\_\_\_ Parents Mobile \_\_\_\_\_

Email \_\_\_\_\_ School/College \_\_\_\_\_

Student Studying in:  XI  XII  XII PASSED  %age of Marks in  X  XII  Board: \_\_\_\_\_

### DECLARATION:

All the information provided by me is correct and I will abide by the norms of the institution. Institute is free to appropriate action in case I fail to abide by the rules and regulations of the institute or breach the code of conduct of institute.

Signature of Student

OPTED LOCATION FOR CLASSES

AFFIX  
A PASSPORT  
SIZE  
PHOTOGRAPH  
HERE

FOR OFFICE USE ONLY

Enrollment Number: \_\_\_\_\_

Date of Joining: \_\_\_\_\_

Center allotted: \_\_\_\_\_

Signature of CENTER HEAD