

Roll No _____



CADET COLLEGE MUZAFFARABAD AJ&K **Application Form for Admission to Class 8th**

(Last date for receipt of application is 15 January 2021)

Affix two
Passport size
photos duly
attested by
Principal/
Headmaster

A. To be filled by the candidate in his own writing in blocks letters:

1. Name of candidate (in full): _____
2. Father's Name (in full): _____
3. Name of Guardian (if father is not alive): _____
4. Father's/Guardian's occupation: _____
5. Father's/Guardian's annual income: _____
6. Mailing Address for future correspondence: _____
_____ Phone _____
7. Permanent Home Address: _____

8. District/Province of Domicile: _____ Religion: _____
9. The School which the candidate is attending on 31 December 2020: _____

10. Bank Draft attached (Rs.1500/-): BC No. and Date _____
11. Test Centre: Cadet College Campus Muzaffarabad AJ&K.

(Signature of Father/Guardian)

(Signature of Candidate)

B. To be filled in by the Principal/Headmaster of the School which the candidate is attending on 31 December 2020:

12. The class in which the candidate is studying: _____
13. The medium of instruction in the school: _____
14. Date of birth as per school record (Figures): _____
Words: _____
15. Age on 01-04-2021: Years _____ Months: _____ Days: _____
16. Anything you would like to add to help us assess the candidate's suitability:

Stamp College/School
Date _____

Signature of
Principal/Headmaster
(Name _____)

Note: Incomplete application forms are liable to be rejected. Over writing or erasing the date of birth will not be acceptable. Attested copy of NADRA Form "B" to be attached with Application Form.

- This application form must be accompanied by two photographs of candidate and bank draft amounting to Rs.1500/- (one thousand & five hundreds only) in the name of Principal Cadet College Muzaffarabad Azad Jammu & Kashmir, as registration fee (non refundable) to be drawn on Habib Bank Chatter Kallas Branch Muzaffarabad (AJ&K). On receipt of application form duly completed in all respect, the candidate will be registered. The Roll No for admission to the examination will be issued later on.
- Please read the instructions carefully before submitting the application form.

INSTRUCTIONS

1. The provision of Prospectus must be read carefully before applying for admission. The details are also available at the College **website www.ccm.edu.pk**
2. Application Form completed in all respect must be accompanied by the following:-
 - a. Two latest photographs of the candidate duly attested by the Principal/Headmaster.
 - b. Bank draft amounting to Rs. 1500/- (one thousand & five hundred only) in the name of Principal Cadet College Muzaffarabad to be drawn on **Habib Bank (Ltd) Chatter Kallas Branch Muzaffarabad (AJ&K)**.
 - c. Undertaking as per Serial No. 5 (below) signed by the candidate and counter signed by Father/Mother/Guardian.
 - d. Address slip with telephone no (given at last page) must be completed and sent with admission form.
3. Application form must be sent under registered postal and addressed to the Principal Cadet College Muzaffarabad AJ&K.
4. Incomplete application form, over aged/under aged applicants and those application forms having no documents or not attached above listed documents shall not be entertained and **registration fee will not be refunded**.

UNDERTAKING

5. I undertake to accept the results of the Entrance Written Examination, Interview and Medical Examination without any reservation. I shall not question these results in any manner at any level and shall not indulge in any correspondence about them. The results cannot be challenged in any court anywhere. I shall not ask to show the marked papers and shall also not demand merit list/results.

DECLARATION

6. I, hereby declare that my son/ward has not been suffering from any chronic disease such as diabetes, cardiac trouble, asthma, Hepatitis A, B, C and T.B etc.

Warning: If found otherwise, his admission in the College is liable to be cancelled at any time during his stay in College.

(Name & Signature of Father/Guardian)

Date: _____

(Name & Signature of Candidate)

Date: _____

MAILING ADDRESS SLIP

[Give below your complete address in Block letters on all the four slips for dispatch of letters. The address must be the same as given in column 6 (Page 1 of the application).]

Candidate's Full Name _____

Father's/Guardian's Name _____

Address with Telephone No _____

Candidate's Full Name _____

Father's/Guardian's Name _____

Address with Telephone No _____

Candidate's Full Name _____

Father's/Guardian's Name _____

Address with Telephone No _____

Candidate's Full Name _____

Father's/Guardian's Name _____

Address with Telephone No _____
