

Form No. _____

Admission Fees: Rs. _____



Ramakrishna Mission Vidyamandira

Belur Math, Howrah – 711202

Placement Cell

(ALL FIELDS FILL IN BLOCK LETTERS)

Name of Coaching/Course: _____

Name of Applicant _____

Address: _____

Mobile No _____

E-mail address _____

Nationality _____

Category: _____

Date –

Signature of the Student

For Office Use only

Form No. _____ Money Receipt No & Date: _____

Name of Coaching/Course: _____

Received with thanks from.....

the sum of Rupees

by Cash/Cheque.....

Signature of the Collector (Cash Section) with date

Admission approved by Administrative Officer with date