

TRINITY INSTITUTE OF PROFESSIONAL STUDIES

SECTOR-9, DWARKA, NEW DELHI-110075

APPLICATION FORM FOR ADMISSION UNDER MANAGEMENT QUOTA**2026-27**CET / CLAT/CUET ROLL NO. _____ COURSE _____ SHIFT _____ BATCH _____
CET/CLAT/CUET RANK _____

1. NAME OF THE STUDENT _____

NAME OF THE STUDENT (In Hindi) _____

2. SEX : M/F _____ DOB _____

3. CATEGORY: GEN/ SC/ ST/ OTHERS

4. REGION (Passed class XII from) : Delhi / Outside Delhi

5. FATHER'S NAME _____

FATHER'S NAME (In Hindi) _____

6. MOTHER'S NAME _____

MOTHER'S NAME (In Hindi) _____

7. FATHER'S OCCUPATION _____ / MOTHER'S OCCUPATION _____

8. PERMANENT ADDRESS _____

9. ADDRESS FOR
CORRESPONDENCE _____

10. AADHAR NUMBER _____

11. CONTACT DETAILS:

S. NO	STUDENT	FATHER	MOTHER
LANDLINE			
MOBILE			
E-MAIL			

12. EDUCATIONAL QUALIFICATIONS

EXAMINATION	YEAR OF PASSING	NAME OF BOARD	SUBJECTS	Best 4 (BBA/BCA/BA(JMC)/BA.LLB (H) including English with domain specified subject) Best 5 (B.Com(H) including English)
10 th Class				
12 th Class				
Any Other				

Affix your passport
size photograph here

Date :

Signature of Student

Verified by the Parents (Signature)