NATIONAL COLLEGE OF FIRE ENGINEERING AND

SAFETY MANAGEMENT

An Autonomous College Recognized By Government of
(Associated with UGC & AICTE Approved)

Ncfsm nagpur   Email ID: ncfsm.np@gmail.com   Website: ncfsm.in

Address: Nagpur , maharashtra

APPLICATION FORM

Instructions

(For Office Use Only)

1. Form should be filled in Block Capital Letters in English Language with Blue Ink only by the   Applicant.
2. Incomplete application will be rejected without any further communication.
3. Filling up of Application from does not guarantees the acceptance of request for evaluation.

Enrollment No.

Course Applied For : _____

Session Year   : _____

(As entered in Secondary / Senior Secondary Certificate)

NAME OF APPLICANT _____

GENDER   Male ☐ Female ☐ Other ☐   **DATE OF BIRTH** D D M M Y Y Y Y

FATHER'S NAME _____

FATHER'S OCCUPATION _____

MOTHER'S NAME _____

MOTHER'S OCCUPATION _____

NATIONALITY _____

Signature of the Applicant

PASSPORT NO.   **VALID UPTO**   **VISA DETAILS IN INDIA** _____

SOCIAL STATUS   GENERAL ☐ SC ☐ ST ☐ OBC ☐ PHYSICALLY HANDICAPPED ☐ MINORITY COMMUNITY ☐

EMPLOYMENT   GOVT. EMPLOYEE ☐ PVT. EMPLOYEE ☐ SELF EMPLOYED ☐ UNEMOLOYED ☐ OTHERS ☐
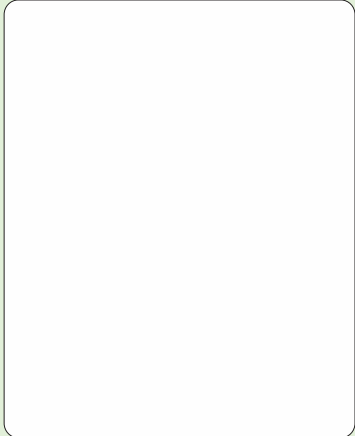
PERMANENT ADD. : _____   **MAILING ADD. :** _____

_____   _____

_____   _____

                    PIN CODE _____   PIN CODE _____
CITY   **STATE**   **STD CODE** _____   **CITY**   **STATE**   **STD CODE** _____
PH. NO.   **MOB. NO.** _____   **PH. NO.**   **MOB. NO.** _____
E-mail _____   **E-mail** _____

Any change in address should be immediately communicated to the college

Signature of the Applicant

ACADEMIC DETAILS (enclose duly attested true photocopies of the originals)

Sr. No.	Name of Examination	Years / Semester	Name of University / Institution / Board	Pass / Fail

DECLARATION BY THE APPLICANT

I hereby declare that aforementioned information and enclosed documents above are true and complete to the best of My knowledge and belief. I shall submit any other documents(s) that may be required by the Institute in future. I also agree that the institution is empowered to cancel my admission, forego the fee deposited and also the claim for admission, if any Information furnished by me is found to be incorrect, misleading or counterfeited. I further declare that the attested Photocopies of the certificates submitted by me at the time of admission are the true copies of the originals.

I am aware of the fact that the courses I desire to join is Autonomous Course run by the National Collage of Fire Engineering And Safety management, .Nagpur

I also declare that after paying the fees installments no refund will be asked. During Pursuing Training / Course / Hostel Accommodation any misleading /Accident / anything happens to me physically / Mentally Institution will not be Responsible.

_____

Place & Date

_____

Signature of the Applicant