

MAHARISHI DAYANAND SARASWATI COLLEGE OF EDUCATION KOSLI(REWARI)

Recognised by NCTE & Affiliated to B.S.E.H. Bhiwani

Admission form for D.El.Ed. Session 2025-27

(Fill in the Block Letters)



Sr. No.

1. Date of Reporting.....Time.....
2. Category.....Category Rank.....
3. Name of the Candidate.....
4. Father's Name.....Occupation.....
5. Mother's Name
6. Husband's Name (If Applicable).....
7. D.O.B.....Date.....Y.....M.....D.....
8. Sex(Male/Female).....Email ID:.....
9. Address.....
.....

10. EDUCATION QUALIFICATION

Name of Examination	Year	Board	Marks Obt.	% of Marks	Division	Subjects
Metric						
10+2						

11. Documents Attached (Tick)

1. Haryana Domicile/Annexure-II
2. Metric (D.O.B.)
3. 12th Marks Sheet
4. Caste.....
5. Category (P.H/WD/ESM/ESMD/FED)
6. Any Other.....

Signature of Candidate

FOR OFFICE USE ONLY

Committee No. 1	Committee No. 2	Accountant
Cat./Domicile etc.	D.O.B., & Age	
Remarks	Remarks	Remarks
Sign 1	Sign 1	Sign 1
Sign 2	Sign 2	Sign 2
Enrolment No.	Institution allotted	
	Institution Head	