

### INDIAN INSTITUTE OF LEGAL STUDIES ADMISSION FOR THREE YEAR LL.B. DEGREE COURSE

(Please fill up the form in Capital letters only)

SESSION 20 \_\_\_\_ to 20 \_\_\_\_ To, The Principal Indian Institute of Legal studies, Matigara, Dist - Darjeeling Siliguri - 734010 passport size West Bengal, India photograph Ph No. 0353 - 2574013 Fax: 0353 - 2574698 E-mail: admissioniils@gmail.com Visit us: www. iilsindia.com Name of the Applicant: \_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_ Religion : \_\_\_\_\_\_ Nationality (please specify): \_\_\_\_\_ Passport No: \_\_\_\_\_ (Mandatory for those who are not in INDIAN Origin) Gender: Male Female (*Tick whichever is applicable*)

Details of the qualifying examination passed (Enclose the percentage / conversion certificate in case of Grades):

Examination	Appeared Year	Board/University/ Authority Place and Country	Full Marks	Marks Obtained	Percentage
Secondary (Class 10)					
Intermediate (Class 10+2)					
Graduation					

### Personal Details: Phone No: \_\_\_\_\_ Mobile no: \_\_\_\_\_ E – Mail id: \_\_\_\_\_ Hobbies: General SC ST OBC Minority (*Tick whichever is applicable*) Category: Minority: \_\_\_\_\_\_(Mention if applicable) Physically Challenged / Disable: Yes No (*Tick whichever is applicable*) Please specify apart from general: \_\_\_\_\_\_\_ Blood Group: \_\_\_\_\_ Allergic: Yes, No (Tick whichever is applicable). (If you have allergic problem, then please specify: \_\_\_\_\_\_ Health Problem (Enclosed Document): \_\_\_\_\_\_\_ Name of the Last College attended: \_\_\_\_\_\_ Complete Address of last college attended: \_\_\_\_\_\_ Address for Correspondence: Land mark: \_\_\_\_\_\_ City / Village: \_\_\_\_\_\_\_ P.O.: \_\_\_\_\_ P.O.: Pin Number: \_\_\_\_\_ Police Station: \_\_\_\_\_\_ District: \_\_\_\_\_\_ State: \_\_\_\_\_\_ Permanent Address: Land mark: \_\_\_\_\_ City / Village: \_\_\_\_\_\_ P.O.: \_\_\_\_\_ P.O.: Pin Number: \_\_\_\_\_ Police Station: \_\_\_\_\_ District: \_\_\_\_\_\_ State: \_\_\_\_\_\_ State:

## **Contact Details:** Contact number of father: Mobile \_\_\_\_\_\_Land Line: \_\_\_\_\_Land Line: Fax: \_\_\_\_\_\_ E- Mail: \_\_\_\_\_ Contact number of mother: Mobile \_\_\_\_\_\_Land Line: \_\_\_\_\_Land Line: Fax: \_\_\_\_\_\_ E- Mail: \_\_\_\_\_ Name of Emergency contact person: \_\_\_\_\_\_\_\_ Relationship with the student: Mobile No: \_\_\_\_\_Land Line: \_\_\_\_\_Land Line: Fax: \_\_\_\_\_\_ E- Mail: \_\_\_\_\_\_ E- Mail: \_\_\_\_\_ (In case of any changes, please intimate immediately) **Details of Parents:** Mother's Name: \_\_\_\_\_\_ Father's Name: \_\_\_\_\_\_ Occupation: \_\_\_\_\_\_Occupation: \_\_\_\_\_\_ Office Address: \_\_\_\_\_\_ Office Address: \_\_\_\_\_ -----; Email: \_\_\_\_\_; Email: \_\_\_\_\_; Email: \_\_\_\_\_; Guardian 's Name: \_\_\_\_\_\_ Relationship with the student: \_\_\_\_\_\_ Guardian 's Phone Number:

Email: \_\_\_\_\_

#### **List of Enclosures:**

- Copy of the mark sheet at the Qualifying Examination (i.e Secondary, Intermediate (10 +2), Graduation (10+2+3 etc.) and percentage / conversion certificate in case of Grades.
- Copy of Registration certificate of North Bengal University.
- Copy of Birth Certificate or Date of Birth Proof.
- 7 passport size photographs including One passport size photograph pasted on the Application Form and one stamp size photograph for Identity Card.
- Migration Certificate in original (For other University)
- Cast Certificate (If Applicable)

•	Demand Draft bearing no	, Dated	for Rs/- 500.00 drawn on
			(BANK) in favor of Indian Institute
	of Legal Studies at Siliguri, Dist - Dar	jeeling, West Bengal, India to be	accompanied along with the application
	form, if , downloaded from the websit	e.	

#### **DECLARATION**

I hereby affirm that the information furnished in the Application Form is true and no material information has been concealed. If any information is found to be false, incorrect or misleading, the College shall have the authority to cancel my candidature / admission without any further enquiry or notice. I undertake to abide the Regulation and disciplinary rules already in force and such other rules that may be made by the College from time to time, if admitted.

Date:	
Place:	
Signature of Parent / Guardian	Signature of Applicant



#### INDIAN INSTITUTE OF LEGAL STUDIES ADMISSION FOR FIVE YEAR B.A/BBA./B.Com.LL.B. INTEGRATED DEGREE COURSE

(Please fill up the form in Capital letters only)

SESSION 20 \_\_\_\_ to 20 \_\_\_\_ To, The Principal Indian Institute of Legal studies, Matigara, Dist :- Darjeeling Siliguri - 734010 Affix West Bengal, India passport size Ph No. 0353 - 2574013 photograph Fax - 0353-2574698 E-mail: admissioniils@gmail.com Visit us: www.iilsindia.com Name of the Applicant: Date of Birth: Religion: Nationality (please specify): Passport No: \_\_\_\_\_\_ (Mandatory for those who are not of Indian Origin) Gender: Male Female (*Tick whichever is applicable*) Course Applied For: BA. LL.B B.Com. LL.B (Tick whichever is applicable) BBA. LL.B Details of the qualifying examination passed (Enclose the percentage / conversion certificate in case of Grades):

Examination	Appeared Year	Board/University/ Authority Place and Country	Full Marks	Marks Obtained	Percentage
Secondary (Class 10)					
Intermediate (Class 10+2)					

### Personal Details: Phone No: \_\_\_\_\_\_, Mobile no. \_\_\_\_\_\_, E – Mail id: \_\_\_\_\_ Hobbies: \_\_\_\_\_ General SC ST OBC Minority (Tick whichever is applicable) Category: Minority: \_\_\_\_\_ (*Mention if applicable*) Please specify apart from general: Physically Challenged / Disable: Yes No (*Tick whichever is applicable*) Blood Group: \_\_\_\_\_\_, Allergic: Yes \_\_\_ No \_\_\_ (*Tick whichever is applicable*). (If you have allergic problem, then please specify): \_\_\_\_\_\_\_ \_\_\_\_\_ Health Problem (Enclosed Document): Name of the Last School attended: \_\_\_\_\_\_ Complete Address of Last School attended: \_\_\_\_\_\_ Address for Correspondence: Land mark: \_\_\_\_\_ City / Village: \_\_\_\_\_\_, P.O.: \_\_\_\_\_\_, P.O.: Pin Number: \_\_\_\_\_, Police Station: \_\_\_\_\_, District: \_\_\_\_\_\_\_, State: \_\_\_\_\_\_, State: Permanent Address: Land mark: \_\_\_\_\_ City / Village: \_\_\_\_\_\_, P.O.: \_\_\_\_\_\_, P.O.: Pin Number: \_\_\_\_\_, Police Station: \_\_\_\_\_,

District: \_\_\_\_\_\_, State: \_\_\_\_\_,

# **Contact Details:** Contact number of Father: Mobile \_\_\_\_\_\_, Land Line: \_\_\_\_\_, Land Line: \_\_\_\_\_ Fax: \_\_\_\_\_\_ , E- Mail: \_\_\_\_\_\_ , E- Mail: \_\_\_\_\_\_ Contact number of Mother: Mobile \_\_\_\_\_\_, Land Line: \_\_\_\_\_, Land Line: \_\_\_\_\_ Fax: \_\_\_\_\_\_ , E- Mail: \_\_\_\_\_ , E- Mail: \_\_\_\_\_ Name of Emergency contact person: \_\_\_\_\_\_ Relationship with the student: Mobile No: \_\_\_\_\_\_, Land Line: \_\_\_\_\_\_, Fax: \_\_\_\_\_\_ E- Mail: \_\_\_\_\_\_ E- Mail: \_\_\_\_\_\_ (In case of any changes, please intimate immediately) **Details of Parents:** Mother's Name: ; Father's Name: ; Father Occupation: \_\_\_\_\_\_; Occupation: \_\_\_\_\_\_; Office Address: \_\_\_\_\_\_\_ ; Office Address: \_\_\_\_\_\_\_\_ \_\_\_\_\_;

Email: \_\_\_\_\_\_ ; Email: \_\_\_\_\_\_ ; Email: \_\_\_\_\_\_ ;

Guardian 's Name: \_\_\_\_\_\_

Guardian 's Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_

#### **List of Enclosures:**

Copy of the mark sheet at the Qualifying Examination (i.e. Intermediate (10 +2) & Secondary and percentage / conversion certificate in case of Grades. Copy of Birth Certificate or Date of Birth Proof. Eight passport size photographs including one passport size photograph pasted on the Application Form and one stamp size photograph for Identity Card. Migration Certificate in original (Other than West Bengal Board) Cast Certificate (If Applicable) Demand Draft bearing no. \_\_\_\_\_\_, Dated\_\_\_\_\_\_ for Rs/- 500.00 drawn on \_\_ \_\_\_\_\_\_ (BANK) in favor of Indian Institute of Legal Studies at Siliquri, Dist - Darjeeling, West Bengal, India to be accompanied along with the application form, if, downloaded from the website. **DECLARATION** I hereby affirm that the information furnished in the Application Form is true and no material information has been concealed. If any information is found to be false, incorrect or misleading, the College shall have the authority to cancel my candidature / admission without any further enquiry or notice. I undertake to abide the Regulation and disciplinary rules already in force and such other rules that may be made by the College from time to time, if admitted. Date: \_\_\_\_\_ Place: \_\_\_\_\_

Signature of Parent / Guardian

Signature of Applicant

#### NRI SPONSORSHIP FORM (IILS)

To,

10,		Affix signed
The Principal, Indian Institute of Legal Studies,		passport size
Dagapur, Matigara,		photograph
DistDarjeeling, Siliguri-734010, W.B.	A	
Tele: (0353)-6507080 / 2574697		
E-mail: iils.siliguri@gmail.com		
Web: www.iilsindia.com		
Sir,		
I do hereby declare that I am a Non-Resi	dent Indian (NRI) and I am attachi	ng herewith
photo copy of my valid passport.		
My present address:		
Phone No.:	Country:	
E-Mail:		
I am willing to sponsor Ms./Mr.	>	
Daughter / Son of		
Address		
as a candidate in the NRI Sponsored ca	tegory for admission to 3 year LL.I	B. or 5 year B.A.
LL.B./ BBA LL.B./ B.Com. LL.B. Course off	ered at IILS, Siliguri. In case she	/ he is selected
for admission and gets herself / himself a	admitted, I undertake to bear the to	otal expenditure
of her / his study for 3 year or 5 year in the	ne above mentioned Institute.	
My relationship with the candidate is:		
	gnature :	
	ame:	

# IILS LIBRARY DAGAPUR, MATIGARA, DIST.- DARJEELING, SILIGURI-734010, W.B.

Affix signed passport size photograph

## MEMBERSHIP APPLICATION FORM (To be submitted along with 3 passport size photographs)

Name (in Capital):	
Designation Faculty / Staff / S	Students / Others:
Course / Semester:	
Present Address:	
Telephone:	Email:
Permanent Address (with pro	oof):
Telephone:	
Area of specialization (Facult	y/Research Scholars only)
I hereby undertake that I shal	I abide by the Rules and Regulations of the IILS
Library.	
Date:	Full Signature of the Applicant
Recomme	endation by Head of the Institution / Unit
I certify that the applicant is	s a member of the faculty/staff/temporary visitor/student
/research fellow of the Institu	te, and recommend him/her for library membership.
Date:	Signature with seal of the
	Head of the Institution
(To be filled in by library staff	f only)
Membership No	
Date:	Signature of the Librarian

#### **JOURNAL / STUDY MATERIAL REQUISITION SLIP**

	Date
Name of the Student/ Faculty	ID No
·	Material:
YearMonth	
Signature of the Student/Faculty	
NB: The journals must be returned to the auti	horized person in sound condition. Students are not
allowed to make any photocopy. All dues are	to be cleared within the working day.
For Office Use:	
No. of Issues: No. of I	ssues given for photocopying
Signature of the Staff:	

# INDIAN INSTITUTE OF LEGAL STUDIES HOSTEL APPLICATION FORM (2014-15)

2. Roll No. :	Affix signed
4. Permanent Address:	passport size
	photograph
(Phone No. If Any)	
5. Category (Gen/SC/ST/OBC):	
6. Gender: Male / Female	
7. Current year/Course in which studying:	
8. Name and address of local guardians:	
Tel. No Mob. No.	
9. Undertaking	
I,	•••••
S/o Sri hereby declare that the information su	
application is true to the best of my knowledge and belief & nothing has b	
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