

## **APPLICATION FORM**

Form No.: ALC / 20..... / .....

Passport Size Photo

# **Approved by Bar Council Of India**

#### (Affiliated to Ch. Charan Singh University (CCS), Meerut.)

Please help us process your application promptly by completing this form. Incomplete or incorrect information could delay the processing of your application. Please write clearly in BLOCK letters. All admissions at ALC are based on the past academic records your performance in the Institute's selection process & final merit list of CCS University.

Course Applied	For:		B.A. I	L.B.	(5 ye	ear)					LI	L.B.	(3 y	ear	)				
Full Name (Mr./Ms	.)																		
Date of Birth		(DD)		1)	MM)			(YY)				Ger	nder (	Male	e/Fer	nale)			
Category (General/	SC/ST/OBC)	)																	
Mobile No.									E-m	nail									
Present Residentia	l Address																		
Domicile		City					State						Pin						
Permanent Resider	ntial Address																		
		City					State						Pin						
Father's Name																			
		Tel.								Mob.									
		E-mail									Profe	ssion							
Mother's Name																			
		Tel.								Mob.									
		E-mail									Profe	ssion							
Father's/Mother's Organisation & Add	lress																		
		Tel.								E-mail									
Annual Family Inco	me (Gross)								Nati	onality									
				ACA	DEM:	IC QI	UALTI	FICAT	101	IS									
Examination	Name of	School/	Colleg			Locat				ard/U	nivers	ity `	Year	of	Com	plet	ion	Sc	ore
Class X																			
Class XII																			
Graduation																			
Note: If you are awa	arded grades	, please co	onvert th	em int	o perc		e of ma		d if p	rovided	, pleas	e stat	te the	form	nula (	given	for c	onve	rsion.
M	ENTION .	THE NA	MES 8	k SCC	ORE (	OF L	AW E	NTR/	ANG	CE TE	ST AF	PPE	ARE	DΙ	N.				

EXTRA CURRICULAR A	CTIVITIES	S / SPOF	RTS (with det	ails of prizes	won, if any)
Why do you want a career in Law and	why do yo	u think	vou ere quit	abla for it 2	(Anguar in 100 words)
Why do you want a career in Law and	wny do yo	u mink	you are sun	able for it?	(Answer in 100 words)
Do you require hostel accommodation?	Yes	No			
Do you require educational loan?	Yes	No			
NAMES AND FULL ADDRESSES OF THE	E REFEREN	NCES			
Reference 1			Name		Reference 2
Address			Address		
Addiess			Audi ess		
Telephone No.			Telephone No.		
Mobile No.			Mobile No.		
Email ID			Email ID		
DECLARATION BY THE APPLICANT					
<ul> <li>(i) I declare that the particulars given above</li> <li>(ii) I solemnly affirm to agree and abide by the Dean / Director, Asian Law College and ful Dean / Director, Asian Law College in all m</li> </ul>	ne rules & reg Ifill my financi	ulations ial obliga	of Asian Law Co tions towards th	ollege Submit n ne college. I ful	
Dated:					
Place:					(Signature of the applicant)
I hereby permit my ward her education at the college financially and in all n	nanners.			to join Asian	Law College and will support his /

(Signature of the Parent / Guardian)

I	S/o /D/o	
R/o		ALC
Noida in	course for the academic session 2020 I hereby undertake that	t I wil
produce my proof of qualifying examina	tion as required by university by	m no
able to produce my proof of qualifying e	examination by the stipulated time, my candidature may be considered null and void and	shal
not claim any refund of fee / registration	amount deposited by me.	
Signature of Eather / Mathew / Local /	Cuardian Cianatura of the Ct.	.do.o.
Signature of Father / Mother / Local (	Guardian Signature of the Stu	Juen
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UNDERTARING OF PROVIDING WIG	RATION CERTIFICATE	
UNDERTAKING OF FROVIDING WIR	RATION CERTIFICATE	
	S/o / D/o	
I	S/o / D/o	
IR/o		ALC,
IR/o	S/o / D/ohave taken provisional admission at	ALC,
IR/o		ALC,
IR/o	S/o / D/o	ALC,
IR/o	S/o / D/o	ALC,
IR/o	S/o / D/o	ALC,
IR/o	S/o / D/o	ALC,
IR/o	S/o / D/o	ALC,
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IR/o	S/o / D/o	ALC,
IR/o	S/o / D/o	ALC,
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IR/o		ALC, ration
I R/o Noida in certificate on or before (date) 20 my candida		ALC, ration

## **HEALTH CERTIFICATE**

### MEDICAL INFORMATION MUST BE SUBMITTED WITH THE APPLICATION FOR ADMISSION

(All Information is confidential and will be used only to determine whether the applicant is able to safely handle the demands of the teaching and training)

Name (Block Letters) Mr./ Ms				Date of Birth	
Present Residential Address					
Telephone No.(s) (Mobile)			(Landline)		
Person to be notified in an	emergency				
Name (Block Letters) Mr./ Ms					
Present Residential Address					
Telephone No.(s) (Mobile)			(Landline)		
Relationship with the applicant					
Family Doctor or Clinic, if	any, to be consulted in an e	mergency			
Name (Block Letters) Mr./ Ms					
Present Residential Address					
Telephone No.(s) (Mobile)			(Landline)		
Is the applicant covered by any r	medical insurance scheme? If so,	give details			
				Signature	of the applicant
THIS SECTION TO BE CO	MPLETED BY APPLICANT'S	S PHYSICI	AN		
	in the profession and its education and				following questions are given:
regularly? If yes, give details	take any medication(s) or drug(s)	YES NO	I have examined	a IVIr./IVIS.	and found the general
			on condition of hea	olth to be	and round the general
2. Does the applicant have any so (a) Vision. If yes, give details	erious disability of:		Name of the Phy		
			Address		
(b) Hearing. If yes, give details	5		Regn. No.		
3. Has the applicant ever been tr	roated or becaitalised for drug				
abuse or emotional or psychol	ogical illness? If yes, give details		Tel No. (Clinic)		(Mob.)
			Place & Date		
4. Does the applicant have any control participation in the physically	ondition which might limit active classes? If yes, give details	3			
			Signature of the	Physician	Official Seal

How did you learn about	the course for which y	ou are applying ? (Please tick whichever is applicable)
Family	Friend	Educational Institute
Newspaper	Website	Hoardings
Name of Newspaper		
Other Source (please specify)		
CHECK		IENTS TO BE SUBMITTED WITH THE FOR ADMISSION (Please Tick)
Class 10th Mark shee	et	4 Passport size Photographs
Class 12th Mark shee	et	Demand draft of ₹ 1000
Migration Certificate		Character Certificate
Graduation Markshe	et	
Please return Complete Ap Law College "payable at N <b>Asian Law College</b> <b>Admission Cell</b> Marwah Studios Complex - II Plot A2, Sector 125 Noida (Delhi NCR) - 201303 India		n a Demand Draft of ₹ 1000/-as application fee drawn in favor of " Asian

After your application has been received, it will be processed within 7 working days by the admissions committee of Asian Law College.

For Office use on	ly:			
Counselor's Name	e :			
Remarks :				



# **Asian Law College**

(Affiliated to Ch. Charan Singh University (CCS), Meerut.)

#### Campus:

Plot A2, Sector 125, Noida-201303 (Delhi NCR), India

Ph: 0120-4594200

Tollfree No.: 18001033032 Website: www.alc.edu.in Email: info@alc.edu.in