 **MQ REGISTRATION FORM B.Ed 2024-25**

**DELHI TEACHERS’ TRAINING COLLEGE**

 **(AFFILIATED TO G.G.S.I.P. UNIVERSITY, DELHI AND**

 **RECOGNIZED BY NRC, NCT, GOVT OF INDIA)**

 **340-DEENPUR, NAJAFGARH, NEW DELHI-110043**

**NAME:………………………………………………………………………. DATE OF BIRTH:………………………………………..**

**FATHER’S NAME:……………………………………………… MOTHER’S NAME:………………………………………………**

**CET ROLL NO:. ………………………………………………… CET/CUET RANK:…………………………………………………**

**CATEGORY:……………………………………………………… GENDER:…………………………………………………………….**

**ADDRESS:………………………………………………………………………………………………………………………………………**

**….……………………………………………………………………… MOBILE NO. : ……………………………………………………**

**AADHAR NO. : ……………………………………………………..**

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| **EXAM PASSED** | **BOARD/ UNIVERSITY** | **SUBJECT** | **PASSING YEAR** | **PERCENTAGE OF MARKS** |
| **X** |  |  |  |  |
| **XII** |  |  |  |  |
| **GRADUATION** |  |  |  |  |
| **POST GRADUATION** |  |  |  |  |

**SIGNATURE OF CANDIDATE SIGNATURE OF PARENTS/ GUARDIAN**

**……………………………………………………………………X X X X………………………………………………………………………**

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| **ACKNOWLEDGEMENT****NAME:……………………………………………………………… FATHER’S NAME………………………………………………..****CET ROLL NO. : ………………………………………………… CET/ CUET RANK………………………………………………..****PAYMENT DETAILS: CASH/ CHEQUE/ ONLINE: …………………………………..****SIGNATURE OF AUTHORITY/ STAMP****NOTE: MANAGEMENT QUOTA REGISTRATION & COUNSELING FEE RS. 2500/- (NON-REFUNDABLE)** |