Ramji Assar Vidyalaya Wadi Trust's

FORM NO.:

LAXMICHAND GOLWALA COLLEGE OF COMMERCE AND ECONOMICS

Gujarati Linguistic Minority Institute

Permanently Affiliated to University of Mumbai & Re- Accredited (2nd Cycle) with Grade "B++" by NAAC College notified under section 2 (f) & 12 (B) of the UGC Act 1956

M.G. Road, Ghatkopar (East), Mumbai- 400 077

PLACEMENT REGISTRATION FORM: 2023-24

Instructions:

- (1) Form should be filled in CAPITAL letters only in Blue Ball Ink.
- (2) In case of overwriting, the form may be rejected.
- (3) Please fill in the form completely and correctly in your handwriting.
- (4) Please $\sqrt{\text{appropriate box}}$, wherever provided.
- (5) If any information sought is not applicable to the candidate, the word "N/A" should be entered
- (6) Please submit the form to the Principal on or before the last date of submission

Affix

Passport Size

Recent colour

Photograph

Tell in the control of the control o					
PRN No.:	16 DIGITS	ID No.:			
Programme	Year: F.Y. S.Y. T.Y. Part I	Part II			
Programme:	B.Com. in subject of Financial Accounting and Auditing (Special)	M.Com. (Advance M.Com. (Bankin	_		
	B.Com. in subject of Business Management (Special)	M.Com. Busines (Management)	s Studies		
	B.Com. (Accounting and Finance) B.Com. (Banking and Insurance)				
	Bachelor of Management Studies B.Com. (Financial Markets)				
	B.Com. (Transport Management)				
	B.Com. (Investment Management)		7		
	Bachelor of Arts ///				
	B.A. (Multimedia & Mass Communication)				
	B.Sc. (Information Technology)				
	B.Sc. (Computer Science)	Aladi Truck			
1. CANDII	DATE'S GENERAL INFORMATION:	Trust			
1. Name:	Surname First Name	Father's Name	Mother's Name		
	(Note: Name should be exactly as mention	ed in H.S.C. Mark sh	neet)		
2. Gender:	Male Female Transgende	er			
3. Date of B	irth: D D M M Y Y Y				
4. Marital S	tatus: Married Unmarried D	vorcee			
5. Mother T	Congue: 6. Dom	nicile:			

7. Are you specially abled: Yes No
If YES, then tick ($$) applicable- disabled/ visually impaired/ speech & or Hearing impaired/ Orthopedic disorder/ mentally retarded
8. Local Address as per AADHAR (for correspondence & Railway Concession):
City/ Village: State:
• • • • • • • • • • • • • • • • • • • •
Pin: Nationality:
9. Mobile No.:
10. Messages will be sent to you for all college related activities like examination, notices, admission, fees, lecture schedule, competitions etc.:
Mobile No. for WhatsApp:
Email ID:
11. PAN:
12. AADHAR No.:
15. Hobbies & Interest:
ESTD 2009
16. I wish: PROJECT INERN
17. Any other Information you would like to add:
A CAMBUB A MERCA CABBRATCH DEPARTMENT A MANAGEMENT AND A

2. CANDIDATE'S ACADEMIC INFORMATION:

Year	Exam Passed	Name of the college	Board/ University	% / Grade / CGPA
	S.S.C.			
	H.S.C. (Mention Stream)			
	First Year Sem I			
	First Year Sem II			
	Second Year Sem III			
	Second Year Sem IV			

Third Year Sem V		
Third Year Sem VI		
M.Com. Sem I		
M.Com. Sem II		

नं सर्वा दर्भ

3. FAMILY INFORMATION:

Family Member	Name	Age	Education	Occupation	Annual Gross Income	Mobile No.
Father	0.0			0/1/		
Mother	3				X	
Spouse		15		SE CE	X	1
Brother/	1. 05			ANI	X	
Sister	2.) FE	V	7
	3.		ESTD 2009			

The principal reserves the right to override any of the above rules in special circumstances and use their discretion to act on matters not covered by the above rules.

UNDERTAKING BY STUDENT

- 1. I hereby accept that all the information provided is correct.
- 2. I have read the above mentioned guidelines of T&P policy of our Institute.
- 3. I accept to pay a fine imposed by college, if I fail to join job provided as per the rules laid.
- 4. I assure you that I will not indulge in any malpractices during recruitment drives.
- 5. I will uphold the dignity of our institution by following the T&P policies.

Signature of Candidate:						
Date:	Place:					