WOMEN'S POLYTECHNIC, AIZAWL, MIZORAM APPLICATION FORM FOR ADMMISION 2023-2024



Name				
Father's name				
Mother's name				
Date of Birth		Place of birth		
	District		State	
Address	Residential Address		Permanent Address	
	Town/Village :		Town/Village :	
	District :	PIN:	District :	
	State :		State :	
Category	SC/ST/OBC/Genera	II		
Name of Course a	pplied : 1)			
	2)			
Educational	ucu	•		IICCI C
Educational Qualification	HSL(L	Voor of no	HSSLC
Qualification	Year of passed : Division :		Year of pa	
	Board :		Board	: •
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Signature and name of applicant	