



# DESTINIES

A Premier Institute for Engineering & Medical aspirants

Reg. No.
.....
Date of Admission
.....
Batch Starting Date
.....

Candidate's Name: .....

Father's Name : .....

Mother's Name : .....

Date of Birth : \_\_\_ / \_\_\_ / \_\_\_\_\_

Sex :  Male  Female

Postal Address : .....

.....

Phone : .....

Mobile : .....

Email : .....

Parent's Mobile : .....

Parent's Email : .....



*Affix your recent  
Passport Size  
Color Photograph*

Student's Signature

School's Name : .....

Class : .....

Subject :  Physics  Chemistry  Biology  Mathematics

Course Type :  Subject  Monthly  Engg.  Medical

Timing : ..... Days  M  T  W  T  F  S  S

Total Fee :

Payment Mode :  Lump Sum  Installment  Monthly

Fee Paid :

Fee Dues :

Parent's Signature

Authorised Signatory



# DESTINIES

A Premier Institute for Engineering & Medical aspirants

Student's Name: .....

Father's Name: .....

Course: ..... Timing ..... Days  M  T  W  T  F  S  S

Total Fee: ..... Fee Paid ..... Fee Dues ..... Payment Mode .....

Student's Signature ..... Parent's Signature ..... Authorized Signatory .....