County IAS Academy

Registration Form

Registration No.____

716, Mahagun Mansion, Crema Block, Phase-1, 1/5 Vaibhav Khand, Indirapuram, Ghaziabad 201010 Phone: 0120-4107287, 0120-3297287, 9810453090, 9415089968

Website: www.countyiasacademy.com

E-mail: hr@countyiasacademy.com

1.	Name:		
2.	Date of Birth:	Month Year	
3.	Gender:		Photo
4.	Medium in which you propose t	to take the classes: English Hindi	
5.	Father's Name:		
6.	Full Address: Permanent: (in CAPITAL letters)		
	l		
	F	PIN:	
	Lc	ocal:	
	F	PIN:	
	E-r	nail:	
7.	Family background		

8. Mention the courses along with the subject(s) for which you wish to be considered for the admission:

9. Educational Qualifications:

Name	Year	Subjects	Board/University	% of Marks	Division/Rank	Medium
Graduation						
Post Graduation						
Extra Qualification						

10. Mention the year in which you had completed your last examination. Please provide photocopies of the certificates.

11.	Optional Subject(s)
	Main Examination: (i) (ii)
12.	Have you appeared in the Civil Services/PCS Examination earlier? If yes, provide complete full details.
13.	Are you still a student? If yes provide details:
14.	Are you employed? If yes provide details:
15.	How did you approach 'County IAS Academy'.
	Parents Friends Teachers Newspapers Magazines Internet
16.	I hereby undertake to obey and comply with all the rules and regulations of the County IAS Academy which i have read and understood, in force from time to time.
	I further declare that the particulars/information provided by me in this form are correct to the best of my knowledge.
Date	e: Signature

N.B.: The decision taken by County IAS Academy on your above application for admission shall be final and binding.

FOR	OFFI	CE	USE	ONLY
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Receipt Amount	Year and Batch	Subject I
Cash/Draft No. and Date	Registration No. and Date	Subject II
Materials Given		Subject III