

**Counselling Form
For M.Ed. Programme under BU**

Name of the candidate:

BUCET Registration No:

Examination Centre:

Fathers name:

Mothers name:

Address:

Contact No:

Sl.No. and Rank as per BUCET result:

Percentage/Grade in B.Ed. Examination:

Name of the on-going course:

Year of Passing B.Ed. Examination:

Bodoland University Registration No:

Photo

DECLARATION

I Sri/Ms declare that the above information are true to best of my knowledge. Further, I promise that I will submit my Registration/Migration Certificate on or before 30th December, 2021. Failing to submit the above mentioned certificate my admission would be liable for cancellation.

Signature of the Candidate

Office order by the Chairman of Counselling Committee:

The following candidate is hereby allotted for admission in M.Ed. 1st Semester.

Signature of verifier/Scrutinizer:

Name of the Institution where admission is approved:

Under Reservation category of:

Signature of the Chairman of Counselling Committee, BU: