



PROF. S. NURUL HASAN COLLEGE, FARAKKA

P.O.- Farakka Barrage. Dist- Murshidabad. Pin-742212 (W.B)

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Ref. No.....

Date.....

জরুরী বিজ্ঞপ্তি

এতদ্বারা সকল ছাত্রছাত্রীদের জানানো যাচ্ছে যে সকলকে নিচে প্রদত্ত Google Form পূরণ করতে হবে। ফর্ম পূরণের শেষদিন আগামী ৩রা এপ্রিল, ২০২২।

- Google ফর্মের লিঙ্কঃ

<https://forms.gle/eSKKFgX3z39bsAAu7>

সকল ছাত্রছাত্রীর এই ফর্ম পূরণ করা বাধ্যতামূলক।

Place: Farakka

Date:26/03/2022

Yours Sincerely,

Sibanish Banerjee

Principal
Prof. Syed Nurul Hasan College
Farakka, Murshidabad



Guidelines for filling up Students Data Collection Form

Purpose

This document provides a clear, detailed step by step instruction on how to fill up details of the students.

Instructions

Step 1: Download the excel file from the link given below

Step 2: The excel contains 6 different sections, Section1 for Personal details, Section 2 for Academic Information, Section 3 for Past Qualification, Section 4 for Current Address, Section 5 for Permanent Address, and section 6 for Guardian Details. Kindly go through the following

Personal Details	
1. Name *	
1.A. First Name	Enter First name of the student
1.B. Middle Name	Enter Middle name of the student
1.C. Last Name	Enter Last name of the student
2. DOB *	Date of Birth of the student (DD/MM/YYYY) for example, 01/01/2004
3. Gender *	Just end M for Male or F for Female or T for Transgender
4. Fathers Name *	Enter Full name of the student's father
5. Mothers Name	Enter Full name of the student's mother
6. Social Category *	fill up from this list: UR, SC, ST, OBC-A, OBC – B
7. Religion *	fill up from this list: Hinduism, Islam, Christianity, Buddhism, Jainism, Parsi, Sikhism, Others



8. Nationality *	fill up from this list: Indian, Foreign Nationals
9. Aadhar No.	Enter Proper 12 digit Aadhaar Number
10. Blood Group	fill up from this list: A+, A-, B+, B-, AB+, AB-, O+, O-, Others
11. Annual Family Income	fill up approximate annual family income of the student
12. Type of Disability *	fill up from this list: NOT APPLICABLE BLINDNESS LOW-VISION HEARING IMPAIRMENT (DEAF AND HARD OF HEARING) SPEECH AND LANGUAGE DISABILITY LOCOMOTOR DISABILITY MENTAL ILLNESS SPECIFIC LEARNING DISABILITIES CEREBRAL PALSY AUTISM SPECTRUM DISORDER MULTIPLE DISABILITIES INCLUDING DEAF BLINDNESS LEPROSY CURED PERSONS PARKINSONS DISEASE DWARFISM ACID ATTACK VICTIM INTELLECTUAL DISABILITY MUSCULAR DYSTROPHY CHRONIC NEUROLOGICAL CONDITION MULTIPLE SCLEROSIS THALASSEMIA HEMOPHILIA SICKLE CELL DISEASE
13. Email Id *	Enter proper email address of the student
14. Mobile No *	Enter proper mobile no of the student
Academic Information	
15. Program Level	fill up from this list: UG, PG, DIPLOMA, CERTIFICATE, MPHIL, PHD, POST DOCTORAL, CA -Intermediate, CFA, CS, CA-Final, CMA, Others
16. Program Category *	fill up from the following list See Annexure I
17. Course / Stream / Subject Name *	fill up from the following list See Annexure I
17.A. Course / Stream / Subject Name Not available in list (Fill this only when your choice is not available in 17)	Enter Course / Stream / Subject Name id not available in list
18. Medium of Instruction *	fill up from this list:



	Bengali, Hindi, English, Urdu, Santali, Oriya, Others
19. Admitted in Admission Session *	Enter the admission session of the student in ####-#### format. For example, 2021-2022 or 2020-2021
Past Qualification	
20. Last qualifying University/Council/Board examination Passed *	Enter the last qualifying examination passed by the student when he/she took admission. For example, for students admitted in UG course – Higher Secondary or Class XII – CBSE etc. to be given
21. Percentage/ Grade obtained *	Enter the percentage / grade obtained in the last qualifying examination passed by the student when he/she took admission.
Current Address	
22. Address Line *	Enter the premises no, street, location of the student's current/Present address
23. State *	Enter Valid State Name
24. District *	Enter District Name
25. PO	Enter Post Office Name
26. PS	Enter Police Station
27. PIN *	Enter 6 Digit Pin Code
28. Municipal Corporation/ Municipality/ Block	Enter Corporation Name or Municipality Name or Block Name
Permanent Address	
29. Address Line *	Enter the premises no, street, location of the student's Permanent address
30. State *	Enter Valid State Name
31. District *	Enter District Name
32. PO	Enter Post Office Name
33. PS	Enter Police Station
34. PIN *	Enter 6 Digit Pin Code
35. Municipal Corporation/ Municipality/ Block	Enter Corporation Name or Municipality Name or Block Name
Guardian Details	
36. Guardian Name *	Enter Guardian Name
37. Guardian Contact No *	Enter Guardian's Contact No
38. Guardian email	Enter Guardian's email if available
39. Relation with Guardian	Enter Relationship of the student with guardian

1. * Marked are mandatory fields, please fill up these fields with proper value. System may not restrict you for filling data even if you skip those fields but fill up as much as fields possible.

Step 3: [Click here to download the excel template and](#) Fill up file and save it in local disk