WEST BENGAL JOINT ENTRANCE EXAMINATIONS BOARD

AQ 13/1, Sector-V, Salt Lake City, Kolkata-700 091

COUNSELLING FORM-JELET 2016

Category (Please tick)

Engg/Tech	Printing	Pharmacy	BSc	Agriculture

Application No.	
General rank	

Date of Birth

D D M M Y Y Y Y

For BSC candidates, Age as on 31.12.2016

Years Months Days

Self Attested copy of a recent passport size photo of the applicant to be pasted within this box

Whether ST(PWD)/SC(PWD)/OBCA(PWD)/OBCB(PWD)/PWD/ST/SC (please tick)

ST(PWD)	SC(PWD)	OBCA(PWD)	OBCB(PWD)	PWD	ST	SC

SC Rank	ST Rank	PWD Rank	OBC-A Rank	OBC-B Rank	

Branch of study in diploma level

(Not applicable for B.Sc. Candidates)

For Diploma holders in Engg./Tech.		For Diploma holders in Pharmacy		For BSC	
Overall % marks considering all semester of Diploma Examination		Overall % marks considering Part I and Part II of Diploma Examination		Overall % marks in B.Sc. (Aggregate/Honours)	
Passed in HS Equivalent		Passed in HS Equivalent		Passed in Mathematics in HS or equivalent	
YES	NO	YES	NO	YES	NO

Name of the Applicant (IN BLOCK LETTERS)

First Name	
Middle Name	
Surname	

For Office Use only

For Diploma holders

Is the diploma course offered by the Institute recognized by AICTE?	Yes	No
Passed HS or equivalent from a recognized Board?	Yes	No
If the candidate is a reserved category candidate		
SC Certificate:	Ok	Not Ok
ST Certificate:	Ok	Not Ok
PwD Certificate:	Ok	Not Ok
For B.Sc. candidates		
Is the degree offered by the University/Institute recognized by UGC?	Yes	No
Passed HS or equivalent from a recognized Board?	Yes	No
Is the age of the candidate ≤ 27 years as on 31.12.2016?	Yes	No

DECLARATION

I do hereby declare that the above statements are true to the best of my knowledge. I also understand that if I do not fulfil the eligibility and other criteria specified in the Information Brochure of JELET-2016, my candidature will be cancelled outright.

…… ……..

Signature of Parent / Guardian **Signature of the candidate in full**

The following allotment code is the option exercised by me based on the availability of seats at the instant of my counselling. I will not claim any other seat in future. I understand that if I do not take admission to the allotted college / institution within stipulated time, my allotment shall stand cancelled. I further understand that I will be required to produce all relevant original testimonials in respect of my fulfilment of eligibility and other criteria as specified in the Information Brochure of JELET-2016 at the time of admission. Otherwise my allotment shall stand cancelled.

Allotment Code …… ……..

Signature of the Candidate in full

Please bring one copy of this counselling form duly filled in and signed before appearing in the counselling

PLEASE ALSO DOWNLOAD IMPORTANT INFORMATION PERTAINING TO COUNSELLING AND COUNSELLING PROGRAMME.