



Beehive College of Management & Technology

Approved by AICTE, Ministry of HRD, Govt. Of India
Affiliated to Uttarakhand Technical University

Campus : Beehive City, Central Hope Town, Selaqui, Dehradun.
Tel: 91-135-2698809, 2110711, Fax: 91-135-2698183.
E Mail: admission@beehivecollege.com

REGISTRATION FORM

www.beehivecollege.com

READ INSTRUCTIONS CAREFULLY BEFORE FILLING UP THIS FORM

Student Information : (Please Use Block Letters)

Photograph 30mm x 36mm

Attested by a
Gazetted Officer
or
Bank Officer or
Centre Incharge

Family Information Applicant

First Name	Middle Name	Surname
Date Of Birth (DD/MM/YY)		
Gender	<input type="radio"/> Male	<input type="radio"/> Female
Category	<input type="radio"/> General	<input type="radio"/> ST <input type="radio"/> OBC <input type="radio"/> SC <input type="radio"/> Others

Parent Information

Father's Name		
Mother's Name		
Home Address	City	
Pin/Zip	State	Country
Mobile No	Phone	E Mail
Father's Occupation		
Company Name		
Company Address		
Pin/zip	State	Country
Mobile No	Phone	E Mail

Guardian

Guardian Name		
Address	City	
Pin/Zip	State	Country
Mobile No	Phone	E Mail

Accommodation & Transport

Accommodation (Subject to availability Option once exercised can not be changed)

Hostel Facility Required <input type="radio"/> Yes <input type="radio"/> No	Transport Facility (BUS) Required <input type="radio"/> Yes <input type="radio"/> No
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Student Profile (To be completed by the student)

Education

Exam Passed	Passed/Appearing	Board/University	Name of School/College	Year	% Obtained
High School					
Intermediate					
Graduation					
Other (Specify)					

Entrance Examination

MAT/CAT/	Roll No.	RankScore	Score	Valid Upto

Program Code

MBA B.Ed.



Declaration by the Student

I _____ S/o,D/o _____ hereby declare that the information furnished by me in this form is correct and true in the best of my knowledge and nothing has been concealed there in. I shall abide by the College rules, general discipline, dress code and norms of Beehive College during the course tenure.

Date: _____ Place: _____

Declaration by the Parents

I _____ F/o,M/o _____ do hereby declare and affirm that I shall be responsible for the conduct and behavior of my son/daughter. I shall also be responsible for paying his/her fees and other dues of the college/University, well in time.

Date: _____ Name of Parent/Guardian _____ Signature of Parent/Guardian _____

For Office Use Only

Admission Recommended by _____ Address _____

Admission Incharge _____ Signature _____

Fee Installment Payment Details

S.No.	Date	Particular	Amount

Fee Details

- Registration Fee
- Tuition Fee
- Membership BSWC
- University Charges
- Transportation Fee
- Hostel Fee
- Hostel Security
- Other Charges

Instructions

- Fee once paid will neither be refundable nor transferable under any circumstances.
- It is the responsibility of student to collect the fee installment schedule from accounts office at the time of admission.
- A fine of Rs. 50/- (Fifty) per day will be levied if installment is not paid by 5th of installment due month.
- Rs. 5000/- (five thousand) will be charged as re admission fee in case of non payment of fees before the last working day of the fee due month.
- All disputes are subject to jurisdiction of Dehradun only.

Date: _____ Name of Parent/Guardian _____ Signature of Parent/Guardian _____

Name of Accountant/ Admission Incharge _____

Signature of Accountant/ Admission Incharge _____