

**GOVERNMENT OF MEGHALAYA
DIRECTORATE OF HIGHER AND TECHNICAL EDUCATION
SHILLONG**

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APPLICATION FORM FOR ADMISSION TO 4 YEAR DEGREE COURSE TO B.SC (HONS)
COMMUNITY SCIENCE/FOOD NUTRITION & DIETETICS FOR THE ACADEMIC
SESSION 2025-2026 AGAINST SEATS RESERVED BY THE CENTRAL AGRICULTURAL
UNIVERSITY, IMPHAL, MANIPUR. **(FOR FEMALE CANDIDATES ONLY)**

Last date of submission of Application Form: 11th August 2025.

Please refer to the instruction sheet before filling up this form.

FOR OFFICE USE ONLY

STUDENT CODE

1. PCB% _____ 2. PCMB% _____ 3. % of Aggregate marks _____

Entered by: _____ Checked by: _____ Date: _____

Name in Full (Block Letters): _____

Father's Name: _____

Mother's Name: _____

Guardian's Name: _____

Gender: _____ Date of Birth: _____

Day Month Year

Age as on 31st August 2025: _____

Year Month Days

Permanent Home Address: _____

Home Town/Village: _____

Post Office: _____ Pin Code: _____

District: _____ State: _____

Address for Communication: _____

Home Town/Village: _____

Post Office: _____ Pin Code: _____

District: _____ State: _____

Email ID: _____ Mobile No: _____

Whether ST (K & J)/ST (G)/UR/OT/SC: _____

DETAILS OF QUALIFYING EXAMINATION:

Name of the Board/Council: _____

Name of the School/College: _____

Marks Secured in the Qualifying Examination:

<u>Subjects</u>	<u>Marks obtained in Theory out of</u>	<u>Marks obtained in Practical out of</u>	<u>Total Marks obtained out of</u>
a. English	_____	_____	_____
b. Physics	_____	_____	_____
c. Chemistry	_____	_____	_____
d. Mathematics	_____	_____	_____
e. Biology	_____	_____	_____
f. MIL/Alt. English	_____	_____	_____
g. Biotechnology	_____	_____	_____
h. Computer	_____	_____	_____
i. Environmental Science	_____	_____	_____
Total	_____	_____	_____
Aggregate % of Marks:	_____		

Division: _____ Year of Passing: _____

Discipline desired: (In order of preference)
(Please enter codes as per instruction sheet)

Sl. No. Code of the Disciplines

- 1.
- 2.

I do hereby declare that the statements made above are true to the best of my knowledge and belief. In case, the statements are found incorrect at any later stage, my application is liable to be summarily rejected.

Date: _____

Signature of Applicant

Place: _____

Name of Applicant

Instruction Sheet

Use the following codes indicated below for entries:

Gender:

M : Male

F : Female

Whether ST (K&J)/ST (G)/Gen/Others ST/SC:

ST/K&J : ST (Khasi & Jaintia)

ST/G : ST (Garo)

UR : Unreserved

OT : Newly Recognized Tribes of Meghalaya other than Khasi, Jaintia & Garo

SC : Scheduled caste

Name of the Board for Qualifying Examination:

01 : H.S.S.L.C. (Science)

02 : ISC (Science)

03 : CBSE (Class XII Science)

04 : Others

Discipline Applied For:

CTS - Community Science

FND - Food Nutrition & Dietetics

Check List:

1. Birth Certificate.
2. Admit Card, Marksheet, Pass Certificate etc of HSSLC or Equivalent Examination.
3. Other ST/SC Certificate if applicable.
4. Permanent Resident Certificate (PRC) in case of Non-Tribal.
5. Six passport size photo to be attested by the nominating authority.
6. Two sets of application forms should be submitted along with self attested copies for each application form.
7. Selected candidates must produce all original documents for verification.