



# Novastra Academy Vocational & Paramedical Science

## MIGRATION FORM

1. Study Centre Name :

2. Study Centre Code :

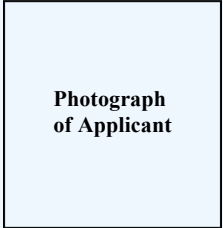
3. Registration No. :

4. Name of the Student in CAPITAL Letter (Leave One Blank after one word):

5. Father's Name in the CAPITAL Letter (Leave One Blank after one word):

6. Mother's Name in the CAPITAL Letter (Leave One Blank after one word):

7. Correspondence Address in the CAPITAL Letter (Leave One Blank after one word):



State  Pincode

8. Mobile No.  Whatsapp No.

9. E-mail ID : \_\_\_\_\_

10. Date of Birth :       11. Gender :   ✓ (Please Tick Mark)

12. Nationality :   If Others Please Specify \_\_\_\_\_ ✓ (Please Tick Mark)

13. Category :  (Fill 1 for General, 2 for SC, 3 for ST, 4 for OBC, 5 for Ex-Servicemen)

14. Centre Name

15. Course Name

16. Course Code

## FEE DETAILS

*Rs. 300/- to be paid through Cash / Demand Draft (DD) or Debit / Credit Card. In case of fee paid through DD give the following details:*

**D.D. No.** **Date** **Branch**

*Demand Draft of Rs. 300/- to be made in favour of "Novastra" payable at Hisar*

**In case of fee paid through Cash or Debit / Credit Card: Receipt No.**

**Date**

**Enclosures** (Photocopy Self attested) (✓)

- Certificate of 10th Class
- Mark sheet of 12th Class
- Diploma Marksheet
- Identity Proof

**Signature of the Applicant**

The application filled in by the student, along with requisite fee & copies of certificate must be submitted to respective Institution.