Ph. No.: 03712 - 244231



## OFFICE OF THE PRINCIPAL & SECRETARY

## লোকনায়ক অমিয় কুমাৰ দাস মহাবিদ্যালয় LOKANAYAK OMEO KUMAR DAS COLLEGE

Accredited by NAAC (Second Cycle) B.

ISO Certified. (E202202649)

Dhekiajuli-784110, Sonitpur, Assam, India

E-mail Indicologe 444@rediffmail.com Website www.lokoloolege.in Phone: (M) 7002277812

Ref. No.- LOKDC/

Dr. Sukdev Adhikari

adhikarisukdev5@gmail.com

Principal

Date-

### Notice For H.S. 1st Year Registration (Session: 2025-26) 22-07-2025

The students of H.S. 1st Year Class (Arts / Science / Commerce) are hereby asked to download the REGISTRATION FORM (attached below) and submit after duly fill the REGISTRATION FORM as per the dates given below to the office of the undersigned.

Failing to submit the above mentioned Form within the stipulated time, the office of the undersigned will not be held any responsible.

#### Date of submission of Form

1st August to 15th August, 2025

#### Documents to be attached along with the Registration Form

- 1. HS 1st Year Admission Money Receipt
- 2. H.S.L.C. Mark Sheet
- 3. H.S.L.C. Admit Card
- 4. Original Gap Certificate (if required)
- 5. Students coming from other Board should submit Migration Certificate (if required)

L.O.K.D. College, Dhekiajuli

Principal

L. O. K. D. College

Dhekiajuli: Sonitpur (Assam.)

# Fee Structure For H.S. 1<sup>st</sup> Year Registration (2025-26) 22-07-2025

- 1) Eligibility Fee= Rs. 300/- (Applicable in case of Migrated student)
- 2) Gap Fee = Rs. 300/- (Applicable for Gap of more than 3 years)

(Dr. Spide Adhikari)

L.O.K.D. College, Dhekiajuli

Principal

L. O. K. D. College

Dhekiajuli : Sonitpur (Assam.)



#### ASSAM HIGHER SECONDARY EDUCATION COUNCIL, BAMUNIMAIDAM::GUWAHATI - 781 021

#### REGISTRATION FORM FOR THE SESSION 2025-26

(0)

| NLY FO        | R THE STUDENTS FROM O   | THER BOARDS/COU  | INCILS REGSITERED U                          | INDER COBSE WH    | O WANT TO P    | PURSUE HS 2 <sup>ND</sup> YEA | R CLASSES UNDER    | R AHSEC) |  |
|---------------|---|------------------|--|-------------------|----------------|-------------------------------|--------------------|----------|--|
|               |   |                  |  |                   |                |                               | РНОТО              |          |  |
| 1.            | NAME OF INSTITUT  | ION :            |  |                   |                |                               |                    |          |  |
| 2.            | INSTITUTION CODE  | NO. :            | :  |                   |                |                               |                    |          |  |
| 3.            | APPLICANT'S NAME  | :                |  |                   |                |                               |                    |          |  |
| 4.            | FATHER'S NAME   | :                |  |                   |                |                               |                    |          |  |
| 5.            | MOTHER'S NAME   | :                | <u>:</u>                                     |                   |                |                               |                    |          |  |
| 6.            | PERMANENT ADDR  | ESS :            |  |                   |                |                               |                    |          |  |
|               |   | VILL/TOV         | VILL/TOWN                                    |                   |                |                               |                    |          |  |
|               |   | РО               | POPINSIGNATURE OF THE STUDENT (Within Box On |                   |                |                               |                    |          |  |
|               |   | DISTRICT         |  | MOBILE            |                |                               |                    |          |  |
| 7.            | PRESENT ADDRESS   | :                |  |                   |                |                               |                    |          |  |
|               |   | VILL/TOV         | VILL/TOWN                                    |                   |                |                               |                    |          |  |
|               |   | РО               |  | PIN               |                |                               |                    |          |  |
|               |   | DISTRICT         |  | MOBILE            |                |                               |                    |          |  |
| 8.            | 8. MEDIUM   |                  |  |                   |                |                               |                    |          |  |
| 12.           | MIGRATED  | ( YES / NO       | ). If Yes, the Orig                          | inal Migration    | Certificate    | e is to be enclos             | sed.               |          |  |
| 13.           | 13. DATE OF ADMISSION ( H S 2 <sup>nd</sup> YEAR ) ( DD/MM/YYYY ) 14. CLASS ROLL NO |                  |  |                   |                |                               |                    |          |  |
| 15.           | STREAM  |                  |  |                   |                |                               |                    |          |  |
| 16.           | SUBJECTS OFFERED  | (Please mention  | n the Subjects na                            | me and code )     | )              |                               |                    |          |  |
|               | I) ENGLISH (COMPULSORY) II) (MIL/ALTE. ENGLISH) III) ELECT                          |                  |  |                   |                | TIVE -I                       |                    |          |  |
|               | IV) ELECTIVE -II  |                  | V) ELECTIVE – III VI) ELECTIVE – IV          |                   |                |                               |                    |          |  |
| 17.           | DETAILS OF PASSIN<br>PERCENTAGE SHOU  |                  |  | •                 |                | 5107                          | TAINED &           |          |  |
| NAME OF BOARD |   | ROLL NO.         | NO   | MARKS<br>OBTAINED | TOTAL<br>MARKS | PERCENTAGE                    | YEAR OF<br>PASSING |          |  |
|               |   |                  |  |                   |                |                               |                    |          |  |
|               |   |                  |  |                   |                |                               |                    |          |  |
|               |   |                  |  |                   |                |                               |                    |          |  |
|               |   |                  |  |                   |                |                               |                    |          |  |
| <u>R</u>      | ECOMMENDATION (   | OF THE PRINCIPA  | AL OF PERMITTE                               | D/RECOGNISE       | D INSTITUT     | TION OF THE CO                | DUNCIL             |          |  |
| e nar         | me and other partic   | ulars of the apr | olicant including                            | Original Mark     | Sheet hav      | ve been checke                | ed and found       |          |  |
|               | The candidate may   |                  |  |                   |                |                               |                    |          |  |
|               |   |                  |  |                   |                |                               |                    |          |  |
|               |   |                  |  |                   |                |                               |                    |          |  |

(SIGNATURE AND SEAL OF THE PRINCIPAL)

#### **DOCUMENTS TO BE ENCLOSED-**

- 1. HSLC Pass Certificate/ Admit card.
- 2. HSLC Marksheet
- 3. Caste certificate, as applicable.

4. Migration Certificate.