



Shiksha Mandal's

G. S. College of Commerce, Wardha



GS-SUN Registration Form

1. Name of Student : _____
2. Class : _____
3. Section : _____
4. WhatsApp Mobile Number : _____
5. Email ID : _____
6. Address : _____

7. 12th Stream : _____
8. 12th Percentage : _____

Paste Passport
Photograph

All the rules and regulations of the course are known to me and are binding to me.

Date:

Signature of Student

Approved by Co-ordinator: _____