DISTRICT INSTITUTE OF EDUCATION AND TRAINING (DIET), SIWAN

APPLICATION FORM FOR D.El.Ed. (2026-2028)

SUBJECT OF ADMISSION : .....

CANDIDATE'S NAME (Capital Letter) : .....

DATE OF BIRTH : .....

FATHER'S NAME : .....

AADHAR NUMBER : .....

CATEGORY : .....

PERMANENT ADDRESS : .....

LOCAL ADDRESS : .....

PHYSICALLY DISABLED (VI, HI, ORTHO) % : .....

Paste Self Attested

Passport Size Photograph

CAF NO. .....

CANDIDATE'S MOBILE NUMBER (WhatsApp): .....

PARENT'S MOBILE NO. : .....

LOCAL GUARDIAN'S MOBILE NUMBER : .....

DOMICILE CERTIFICATE NO : .....

CASTE/EWS CERTIFICATE NO. : .....

SLC/CLC CERTIFICATE NO. : .....

BANK CHALLAN NO. : .....

URDU/DEPENDENT (YES/NO) : .....

BSEB APPLICATION NO. : .....

ALLOTMENT LETTER NO. : .....

MARKS OBTAINED : .....

GENERAL MERIT : .....

CATEGORY MERIT : .....

SERIAL NO. OF SELECTION LIST : .....

DETAILS OF ACADEMIC QUALIFICATION FOR VERIFICATION

Class	Board Name	School Name	Passing Year	Roll No	Roll Code	Reg. No	Obtained Marks	Full Marks	Certificate No	Date of Issuing Certificate
10th										
12th										
Graduation (if any)										

SELF DECLARATION

I.....Son/Daughter of .....Resident of / Address.....PIN.....hereby declare that the above facts have been filled / given by me are true and correct to the best of my knowledge. I am a permanent resident of Bihar and at present I am not enrolled / admitted in any other College or Institution. If the above information is found to be incorrect then the disciplinary / legal decision given by the institution shall prevail.

Date:.....

Place:.....

Guardian Signature

Signature of the Candidate