

DISTRICT INSTITUTE OF EDUCATION AND TRAINING (DIET), SIWAN
APPLICATION FORM FOR D.El.Ed (2026-2028) SPOT ROUND-1 ADMISSION

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) % :

CANDIDATE MOBILE NUMBER (WhatsApp) : URDU/DEPENDANT YES/NO :

PARENT'S MOBILE NO. : BSEB APPLICATION NO. :

LOCAL GUARDIAN'S MOBILE NUMBER : ALLOTMENT LETTER NO. :

DOMICILE CERTIFICATE NO : MARKS OBTAINED :

CASTE/EWS CERTIFICATE / EWS NO. : GENERAL MERIT :

SLC/CLC CERTIFICATE NO. : CATEGORY MERIT :

BANK CHALLAN NO. : SERIAL NO. OF SELECTED LIST :

Paste Self
Attested

Passport Size
Photograph

CAF NO.

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
10 th										
12 th										
Graduation (if any)										

SELF DECLARATION

I.....Son/Daughter ofResident 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