



Pankaj Laddhad Institute of Technology and Management Studies, Buldana
Department of _____ Engineering

Teacher Guardian Scheme
Personal Data Sheet

Scholar No.

Enrollment No.

1) Name of the Student _____
First name Middle name Surname / last name

2) Mail ID of Student: _____ Nationality _____

Bank A/C No _____ Bank Name _____

3) All Nick Names: _____ DOB Adhaar card No. _____
DD MM YYYY

4) Parents (Father's/Guardians) Name: _____

5) Parents (Mothers/Guardians) Name _____

6) Parents Address: _____

Place: _____ District: _____ State: _____ Pin Code: _____

Students Mobile No: _____ Parent Mobile No _____

Admitted in round (): _____ CAP/ Institute Level Date of Admission : _____

Category : _____ Cast : _____ Physically Handicapped : Yes/ No _____

Scholarship Applied in category: SC/ST/VJ/NT/OBC/EBC/SBC / _____

7) Hobbies: _____

8) Reading (Books, News paper, Magazine, Journals) Mention Language: _____

9) Family background

Father's Education: _____ Occupation: _____

Mother's Education: _____ Occupation: _____

No. of Brothers : _____ Their education : _____

No. of Sisters : _____ Their Education: _____

Annual Income of Family : _____

Is there any agriculture in the family? Yes/No _____

Status of your home area : City/Urban/Rural : _____

10) Students Local/Hostel information

During the Years	Room No./owner's Name with address	Partners with Class
1 st Year 20 -20		
2 nd Year 20 -20		
3 rd Year 20 -20		
Final Year 20 -20		

11) Academic Record:

When A.T.K.T or DC

Sr. No	Name of Exam	When Fully Passed		Exam S/W	Subject Passed	Exam S/W	Subject Passed	Exam S/W	Subject Passed
		Yr	%						
1	SSC								
2	HSC								
3	Diploma								
4	I SEM								
5	II SEM								
6	III SEM								
7	IV SEM								
8	V SEM								
9	VI SEM								
10	VII SEM								
11	VIII SEM								

- 12) Final Year Seminar : _____
- 13) Final Year Project : _____
- 14) Paper Presented : _____
- 15) Any Other Contribution : _____

FOR OFFICE USE ONLY

16) Teacher guardian

Class	Year	Class Roll No.	Teacher Guardian	Signature of Guardian	Date of Letters Written
I st Yr	20 -20		Prof		
II nd Yr	20 -20		Prof		
III rd Yr	20 -20		Prof		
Final Yr	20 -20		Prof		

17) RESPONSE: (Details of replies received from parents)

Year	Response	Sign Of HOD
I st Yr		
II nd Yr		
III rd Yr		
Final Yr		

Instructions:

1. It will be responsibility of students to convey any change in the above filled information to TG.
2. TG will take remark of Head of Department on the filled form during commencement of semester
3. TG will be in touch with students and have at least one meeting in a week and keep record.
4. TG should keep a photocopy mark sheet of every Examination (Pass/Fail both).
5. TG will submit this form at the end of Eight Semester to Head of Department and photocopy in office