

# West Bengal Board of Primary Education

Application For Two Year D.El.Ed. Course (REGULAR) Session 2025-27

Institute Name - **Bangarh Scholar Teachers Training Institute**

Candidate Name															D O B ____/____/____			Photo
Father's Name															Gender Male / Female			
Mother's Name															Category			
Present Address																		
Village																		
Post Office																		
Police St.																		
District																		
State																	PIN Code	
Permanent Address																		
Village																		
Post Office																		
Police St.																		
District																		
State																	PIN Code	
Email.ID.	Guardian Ph. No:																	
Phone No																	Whatapp No	
Aadhar No								ABC ID										
Academic Details of Higher Secondary or Equivalent Institute Name																		
Statement Of Marks In The H.S Or Equivalent Examination Passed By The Applicant																		
Name Of The Examination	Name Of The Board/Council	Passing Year	Marks Obtained (Aggregate Of The Best Five Excluding EVS)					Total	Percentage (%)									
			LANG	Sub 1	Sub 2	Sub 3	Sub 4											
_____ Signature of the Candidate																		
Office Use Only:-																		
Contact No:-9733060359 or email us:- secretary@bstti.org.in																		