EWING CHRISTIAN COLLEGE, PRAYAGRAJ

(An Autonomous Constituent College of Allahabad University)

<u>FORM - C</u> STREAM CHANGE FORM

This Form must be filled by all candidates of Faculty of Science who are seeking change of stream, provided their name appears in the stream in which they wish to shift. Shifting of Stream is subject to availability of seats. Incompletely filled forms will not be entertained.

[The candidate must appear in person when applying for change of stream]

Name of Candidate:	•••••••••••
Aadhaar Number:	
Address:	
Father's name:	
Entrance Test Roll Number:	
Registered Mobile Numb	er:
Stream in which Admission has already been taken: (Attach copy of fee receipt)	
Stream in which Admission is to be taken:	
Whether the name of the country to be take: Yes/No	candidate is present in the merit list of stream in which admission is
Kindly attach a copy of:	
1. Entrance Test Resu	lt
2. Attach copy of fee i	eceipt
3. Aadhaar Card	
UND	ERTAKING TO BE SIGNED BY THE STUDENT
All information p	rovided by me is true and correct to the best of my knowledge.
If any discrepancy or incorrect information is found, my admission may be cancelled.	
Student Signatur	re:
For office use only:	
Verified by:	Date:
Approved by: Date:	