

COMPETITIVE POTENTIAL ASSESSMENT (CPA) TEST

CPA APPEARING FOR : 8th Moving 9th Moving 10th Moving 11th Moving 12th Moving

CPA STREAM : Engineering Medical

CPA EXAM DATE : _____

CPA EXAM CENTRE : _____

REGISTRATION NO. : _____

CPA ROLL NO. : _____

1. Name of the Candidate (in Block Letter) : _____
FIRST MIDDLE LAST

2. Date of Birth : DD MM YYYY Gender : Male Female

3. Caste Category : Open SC ST NT VJ OBC Other _____

4. Address for Communication : _____

City : _____ Pin No : _____

5. PHONE NO. : Home : _____ Parent : _____

* Communication No : _____ Student : _____
(For Official SMS)

6. Parents Email Id : _____

7. Student Email Id : _____

8. Name of School/College : _____

9. Details of Previous Exam : Standard : _____ Percentage : _____

Medium : English Semi English Other _____

Board : Mah. State CBSE ICSE Other _____

10. Special Academic Achievements of the Candidate :

		Appeared	Not Appeared	Qualified	Not Qualified	Rank/Merit No
Scholarship	IV					
Scholarship	VII					
MTSE	VIII					
MTSE	X					
NTSE	VIII/X					
AMTI	II to X					
Other Olympiad /Exam						
Only for Repeaters		JEE Main Marks & Rank :		JEE Advanced Marks & Rank :		

*Enclose the photocopy copies of supporting document.

11. Family Details

	Name	Age	Education
Father	: _____	_____	_____
Mother	: _____	_____	_____
Brother (s)	: _____	_____	_____
	_____	_____	_____
Sister (s)	: _____	_____	_____
	_____	_____	_____

12. Father's Occupational Details

: Agriculture Business Doctor Engineer Law Practice
Teaching /Research Public / Govt. Private Defence Others _____

Name of Company : _____ Designation : _____

13. Mother's Occupational Details

: Agriculture Business Doctor Engineer Law Practice
Teaching /Research Public / Govt. Private Defence Housewife

Name of Company : _____ Designation : _____

14. Parent's Total Annual Income

: Up to Rs.1 Lac Rs.1 lac-5 Lac Rs.5 lac- 10 lac Above Rs.10 lac

15. Reference

: Advt Article Friend* ICAD Student* Other* _____

DECLARATION

- I hereby declare that all the particulars stated in this CPA Enrollment Form are true and correct to my knowledge & belief.
- Competitive Potential Assessment (CPA) Test Fee will not be refunded /adjusted against any other course/centre

Date : _____

Signature of Candidate
in running hand.

Date : _____

Signature of Father / Mother
in running hand.

OFFICE USE

CPA Registration Fees : ₹ /-

Receiver Name : _____

Date : _____

Signature : _____