



GOVERNMENT OF NAGALAND
SAO CHANG COLLEGE
TUENSANG-798612, NAGALAND
(NAAC Accredited)
Website: www.saochangcollege.com
Email: sctsg@gmail.com

PASTE
PASSPORT
HERE

Date of Submission: / /

To,

The Principal,
Sao Chang College,
Tuensang-798612, Nagaland.

ADMISSION FORM 2025
FOR B.A/B.SC (4th SEMESTER)

Stream: B.A Honours ☐

B.Sc Minor ☐

(CBCS)

Sir/Madam,

I do hereby seek admission to _____ for the academic session 2025.

1. Name of the Applicant (IN BLOCK LETTERS)
2. Present address
3. Permanent address
4. Phone No. of Applicant
5. WhatsApp Number
6. Email
7. Sex: Male ☐ Female ☐ Others ☐
8. Aadhaar No: Email ID
09. Date of Birth (as per HSLC Admit card): Date year
10. Nationality Religion Community
11. ST ☐ SC ☐ OBC ☐ GENERAL ☐
12. Whether employed in any department? If yes, mention details
13. Whether physically disabled: No. ☐ Yes. ☐
If yes, mention Card No. or enclose certificate from competent authority.
14. Father's Name Occupation
Address Phone No
15. Mother's Name Occupation
Address Phone No
16. Local Guardian's Name Occupation
Address Phone No

17. SUBJECT COMBINATION (ARTS)

HONOURS (CORE COURSE)	GENERAL ELECTIVE (GE- 4) COURSE	SKILL ENHANCEMENT COURSE (SEC 2)
		Communication Skills
• CC & GE Subjects shall remain the same as in 3 rd semester.		

SUBJECT COMBINATION (SCIENCE):

Group 1		Group 2	
Mathematics	Tick ☐	Zoology	Tick ☐
Physics		Botany	
Chemistry		Chemistry	
SEC		SEC	
➤ Choose any 1 (one) group and put tick mark ➤ Skill Enhancement Course (SEC) shall be compulsory.			

DOCUMENTS REQUIRED DURING ADMISSION

- Admit Card (Photocopy) of the previous NU examination last appeared.
- Screenshot of Admission fee payment details.
- Two passport size photos.

UNDERTAKING BY THE STUDENT

I, Mr/Ms _____ son/Daughter _____
do hereby declare that all my particulars furnished above are true to the best of my knowledge and that nothing has been concealed thereof. In the event of any fake entries at any stage, my admission may be cancelled.

Signature of Parent/Guardian
(With date)

Signature of Applicant
(With date)

VERIFICATION FROM ESTABLISHMENT BRANCH

Minimum Academic criterion for admission in _____ semester at Sao Chang College in respect of Mr./Ms. _____ is fulfilled.

Signature with Date
HEAD ACCOUNTANT

PERMISSION OF THE PRINCIPAL

All the documents and particulars of Mr/ Ms _____ are verified and found to be correct. The applicant is thereby allowed to take admission in _____ at Sao Chang College for the academic session 2025.

Signature with Date
PRINCIPAL