







IISWBM's Copy	
	
<b>IISWBM</b> <b>Management House, Kolkata 700 073</b> West Bengal <b>STATE BANK OF INDIA</b> <b>POWER JYOTI ACCOUNT NO. 32495656710</b> Surya Sen Street Branch 5 & 7/2, Surya Sen Street, Kolkata - 700 012 (To be filled by the candidate)	
DISCIPLINE :	<b>ADFSM (18 MONTH)</b>
APPLICANT NAME :	
FATHER'S NAME :	
DATE OF BIRTH :	
SBI BRANCH NAME :	
SBI BRANCH CODE :	
DATE OF DEPOSIT :	
APPLICATION FEE : Rs. 300/- (Including bank charge of Rs. 25/-)	
AMOUNT IN WORDS : Rupees Three Hundred only	
SIGNATURE OF THE REMITTER	
<b>TO BE FILLED BY BANK</b>	
JOURNAL NO. (HOST TRACE NO.)	
Date :	SIGNATURE OF THE
Place :	AUTHORISED OFFICIAL WITH THE BANK SEAL
<b>IMPORTANT INSTRUCTIONS :</b>	
<ol style="list-style-type: none"> <li>Candidates should send IISWBM's copy of this challan along with the printed downloaded application form to IISWBM keep applicant's copy of this challan form for future reference.</li> <li>Candidate should ensure that the Journal No. (Host Trace No.) its allotted by Bank for this payment.</li> <li>The Bank should not do bench posting or trickle feed Journal No. (Host Trace No.) should be entered by the Bank.</li> </ol>	

Applicant's Copy	
	
<b>IISWBM</b> <b>Management House, Kolkata 700 073</b> West Bengal <b>STATE BANK OF INDIA</b> <b>POWER JYOTI ACCOUNT NO. 32495656710</b> Surya Sen Street Branch 5 & 7/2, Surya Sen Street, Kolkata - 700 012 (To be filled by the candidate)	
DISCIPLINE :	<b>ADFSM (18 MONTH)</b>
APPLICANT NAME :	
FATHER'S NAME :	
DATE OF BIRTH :	
SBI BRANCH NAME :	
SBI BRANCH CODE :	
DATE OF DEPOSIT :	
APPLICATION FEE : Rs. 300/- (Including bank charge of Rs. 25/-)	
AMOUNT IN WORDS : Rupees Three Hundred only	
SIGNATURE OF THE REMITTER	
<b>TO BE FILLED BY BANK</b>	
JOURNAL NO. (HOST TRACE NO.)	
Date :	SIGNATURE OF THE
Place :	AUTHORISED OFFICIAL WITH THE BANK SEAL
<b>IMPORTANT INSTRUCTIONS :</b>	
<ol style="list-style-type: none"> <li>Candidates should send IISWBM's copy of this challan along with the printed downloaded application form to IISWBM keep applicant's copy of this challan form for future reference.</li> <li>Candidate should ensure that the Journal No. (Host Trace No.) its allotted by Bank for this payment.</li> <li>The Bank should not do bench posting or trickle feed Journal No. (Host Trace No.) should be entered by the Bank.</li> </ol>	

Bank's Copy	
	
<b>IISWBM</b> <b>Management House, Kolkata 700 073</b> West Bengal <b>STATE BANK OF INDIA</b> <b>POWER JYOTI ACCOUNT NO. 32495656710</b> Surya Sen Street Branch 5 & 7/2, Surya Sen Street, Kolkata - 700 012 (To be filled by the candidate)	
DISCIPLINE :	<b>ADFSM (18 MONTH)</b>
APPLICANT NAME :	
FATHER'S NAME :	
DATE OF BIRTH :	
SBI BRANCH NAME :	
SBI BRANCH CODE :	
DATE OF DEPOSIT :	
APPLICATION FEE : Rs. 300/- (Including bank charge of Rs. 25/-)	
AMOUNT IN WORDS : Rupees Three Hundred only	
SIGNATURE OF THE REMITTER	
<b>TO BE FILLED BY BANK</b>	
JOURNAL NO. (HOST TRACE NO.)	
Date :	SIGNATURE OF THE
Place :	AUTHORISED OFFICIAL WITH THE BANK SEAL
<b>IMPORTANT INSTRUCTIONS :</b>	
<ol style="list-style-type: none"> <li>Candidates should send IISWBM's copy of this challan along with the printed downloaded application form to IISWBM keep applicant's copy of this challan form for future reference.</li> <li>Candidate should ensure that the Journal No. (Host Trace No.) its allotted by Bank for this payment.</li> <li>The Bank should not do bench posting or trickle feed Journal No. (Host Trace No.) should be entered by the Bank.</li> </ol>	