







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>	
1. 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. 2. Candidate should ensure that the Journal No. (Host Trace No.) its allotted by Bank for this payment. 3. The Bank should not do bench posting or trickle feed Journal No. (Host Trace No.) should be entered by the Bank.	

Applicant's Copy	
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