



Kantipur Television Network Pvt. Ltd.

Date:

Participation in the program "Inter College Quiz Contest".

Name of the college:

Address:

Contact No.:

Fax:

Email:

Name of the college contact person:

Name of the Student 1: 10+2 Bachelor Masters

Name of the student 2: 10+2 Bachelor Masters

Preferred Subject 1:

2:

3:

4:

Others if only:

.....
Signature & Seal

Note: Conditions shall be applicable to each participating college.