



POST GRADUATE APPLICATION FORM



An ISO 9001 - 2015 Certified Institution

Application No -

Degree Applying for : _____
Branch : _____

NAME OF THE APPLICANT : _____

DATE OF BIRTH : _____

GENDER (MALE/FEMALE) : _____

CASTE & COMMUNITY (FC/BC/MBC/SC/ST) : _____

NATIONALITY AND RELIGION : _____

NAME OF THE PARENT / GUARDIAN : _____

OCCUPATION : _____

ANNUAL INCOME : _____

ADDRESS FOR CORRESPONDENCE

DOOR No. _____

STREET _____

CITY _____

PINCODE _____

STATE _____

MOBILE No. OF THE STUDENT : _____

MOBILE No. OF THE PARENT : _____

PHOTOGRAPH

Recent Passport Size
Photograph

AADHAAR NUMBER OF THE APPLICANT

ARE YOU PHYSICALLY CHALLENGED : _____
 DISTINCTION IN SPORTS / NSS / NCC : _____
 QUALIFYING EXAMINATION PASSED : UG DEGREE _____
 NAME OF THE COLLEGE LAST STUDIED : _____
 ADDRESS OF THE COLLEGE : _____

DETAILS OF EDUCATIONAL QUALIFICATION

Qualification	Board/University	School/College	Month/Year of Passing	%
SSLC				
PLUS TWO				
UG DEGREE				
DIPLOMA (IF ANY)				

HOSTEL ACCOMODATION :YES / NO

COLLEGE TRANSPORTATION :YES / NO

DECLARATION:

I hereby declare that all the particulars stated here are true to the best of my knowledge and belief.
 I have read and understood all provisions of admissions and agree to abide by them.
 In event of submission of fraudulent, incorrect information of any fact like educational qualification, marks, nationality etc.I understand and agree that my admission/degree is liable for cancellation.
 I agree that my admission is purely provisional subject to the verification and eligibility conditions.

STATION AND DATE:

Signature of the Applicant

Signature of the Parent

Signature of the Principal