

Application issued to.....



# Sri Ganesh College of Arts & Science

(Co-Educational Institution - Affiliated to Periyar University)

Kamaraj Nagar Colony, AMMAPET, SALEM-636 014.

Ph : 0427-2242999, 6532244

APPLICATION No.

Roll No.

COURSE

## APPLICATION FOR ADMISSION - UG COURSE

### 20 - 20

(TO BE FILLED IN CAPITAL LETTERS)

AFFIX  
YOUR PASSPORT  
SIZE  
PHOTO HERE

1. Name : \_\_\_\_\_

2. Date of Birth : \_\_\_\_\_ 3. Age : \_\_\_\_\_ 4. Sex :  M  F  Transgender

5. (a) Nationality : \_\_\_\_\_ 5.(b). Religion : \_\_\_\_\_

6. Community :  OC  BC  MBC  SC  ST 7. Caste : \_\_\_\_\_

8. Address for Communication : \_\_\_\_\_

Pincode : \_\_\_\_\_ Phone No. \_\_\_\_\_ Std Code : \_\_\_\_\_ Cell : \_\_\_\_\_  
Offi : \_\_\_\_\_ Resi : \_\_\_\_\_

WhatsApp No. : \_\_\_\_\_ E-mail : \_\_\_\_\_

9. (a) If handicapped, <sup>Physically</sup>  <sub>Visually</sub>  specify the percentage : \_\_\_\_\_ (b) Blood Group : \_\_\_\_\_

10. If you are Ex-Service Men <sup>Son</sup>  <sub>Daughter</sub>  <sup>Yes</sup> Designation \_\_\_\_\_ <sup>No</sup> \_\_\_\_\_

11. Language for communicating with parents :  Tamil  English  Hindi  the relevant box

12. Are you of Tamil Origin of Andaman Nicobar Islands or any other State ? :

13. Distinction in Sports / NCC / NSS / Red Cross / any other :

Sports Details : \_\_\_\_\_

14. Whether any of your family member studied / is studying in this college ? If Yes, give details.

Name : \_\_\_\_\_ Class : \_\_\_\_\_

Year : \_\_\_\_\_ Relationship : \_\_\_\_\_

15. Whether Hostel (Accommodation) required? Yes  No

Academic Details	S.S.L.C.	H.S.C.
Name and Address of the School last studied		
Medium of Study		
Mention Whether : State Board <input type="checkbox"/> CBSE <input type="checkbox"/> Other State <input type="checkbox"/> <input checked="" type="checkbox"/> the relevant box		

### For Office Use only

Reference : .....

Fee Concession : .....

Date of Admission : .....

T.C. No. : .....

Issued Date : .....

H.O.D Principal

17. Qualifying Examination Passed :

HSC or PDC or Equivalent :

SUBJECT	MARKS *	MAXIMUM	MONTH & YEAR OF PASSING	REGISTER NUMBER	No. of ATTEMPTS
Part I :		200			
Part II :		200			
Part III :					
1.		200			
2.		200			
3.		200			
4.		200			
TOTAL		1200			

\* Calculate to the maximum of 200

**18. DETAILS OF PARENTS**

FATHER / GUARDIAN	PERMANENT ADDRESS
Name :	
Qualification :	
Occupation :	
Annual Income :	
	STD Code : ..... Phone No. Off : .....
	Resi : ..... Cell : .....

I declare that all the particulars furnished above are true and correct.  
I submit that I will abide by the rules and regulations of the college.

Place : .....

Date : .....

PASTE FATHER'S  
PASSPORT  
SIZE  
PHOTO

PASTE MOTHER'S  
PASSPORT  
SIZE  
PHOTO

Signature of the Parent / Guardian

Signature of the Applicant