# ADMISSION FORM

| | |
|---|---|
| 1 | Name of the candidates(Capital Letters) |

| | | | | | |
|---|---|---|---|---|---|
| 2 | Date of Birth (dd-mm-yy) | | | 3 | Sex (M/F) |

| | | | |
|---|---|---|---|
| 4 | Caste | 5 | Religion |
| 6 | Nativity | 7 | Village |
| 8 | Thaluk | 9 | District |
| 10 | State | | |

11. Address with contact phone No.

| Permanent | Present | Local Guardian |
|---|---|---|
| | | |

| | |
|---|---|
| 12 | Name of Parent/ Guardian |
| 13 | Occupation |
| 14 | Relation with the student |

Examination Details

| | | | |
|---|---|---|---|
| 15 | Name of Examination Passed | Reg. No. | Year |

| | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Marks Secured | Physics | | | | Chemistry | | | | Maths | | | |
| | Maximum | | | | Maximum | | | | Maximum | | | |

| |
|---|
| Name of the School attended for 10th standard |
| Name of the College/school attended for PDE/12/CBSC |

dd mm yy

| | | | |
|---|---|---|---|
| 16 | T.C. No. | | Date |
| | Institution | | |
| 17 | Admission Date | | Date |

## DECLARATION

Certified that all the particulars furnished above are true and I am willing to undergo any kind of punishment including expulsion from the College. It is found that any of the above statement if false.

Place:
Date:

Signature of candidates :

Admission No.

## FOR OFFICE USE ONLY

Class No. Allotted

dd mm yy

| | | | |
|---|---|---|---|
| Details of fees amount | | Receipt No. | Date |

Accountant Professor Principal