

Application No: \_\_\_\_\_

Online Application No: \_\_\_\_\_



# CARMELGIRI COLLEGE ADIMALI-KERALA-685561

Phone: - 04864-217382 Mob: - 9745181899 ,9562483775

AFFILIATED TO MAHATMA GANDHI UNIVERSITY U.O. NO.3462/3/2013 & APPROVED BY THE GOVERNMENT OF KERALA G.O(Ms) NO.313/2013

(Owned and managed by CMC Carmelgiri Province- Idukki)

Application for admission to the Under Graduate Programmes for 20..... – 20.....

Note: Make Entries In Box, Tick ( ✓ ) The relevant entries.



## Admission details (Fill in As Appear In SSLC/ 10<sup>th</sup> Grade Card: Numbers 1 to 9)

1.Name of Student : \_\_\_\_\_

2.Father's Name : \_\_\_\_\_

3.Mother's Name : \_\_\_\_\_

4.Date Of Birth: \_\_\_\_\_

5.Religion : \_\_\_\_\_ Caste: \_\_\_\_\_

6.Category : 

General X	General H	Muslim	OBCH	LC	OEC	SC	ST	Anglo Indian
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7.Mother tongue : \_\_\_\_\_ Blood Group : \_\_\_\_\_

8.Gender : Male / Female Married : Yes / No

9.Place Of Residence: \_\_\_\_\_ Panchayat/Municipality \_\_\_\_\_

10.Course Desired: BA English Literature/BSc Psychology/B.Com – Commerce/BSW

First Choice : \_\_\_\_\_

Second Choice : \_\_\_\_\_

11.Name of the qualifying exam: 

DHSE	VHSE	CBSE	ICSE	NIOS	OTHER
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12.Number of chances appeared : (ONE/TWO): \_\_\_\_\_ (REGULAR/STATE OPEN/NATIONAL OPEN) \_\_\_\_\_

13.Annual Income of the family:

14.Whether the applicant is physically handicapped : 

YES	NO
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If Yes, give details \_\_\_\_\_

## 15. Academic details: ( 12<sup>th</sup> Std. Details )

Name of Exam. : \_\_\_\_\_

Board of Exam. : \_\_\_\_\_

Name of School: \_\_\_\_\_

Register Number : \_\_\_\_\_ Passing Month & Year: \_\_\_\_\_

Total Marks : \_\_\_\_\_ Grade: \_\_\_\_\_

16. **Achievement in Sports / Games / Arts in State / National Level**

Position & Grade: \_\_\_\_\_

17. **Participation in NSS/NCC**

Yes  No

18. **Address Details: (Parent/Local Guardian)**

Address : \_\_\_\_\_

City : \_\_\_\_\_ Pin : \_\_\_\_\_ Dist. : \_\_\_\_\_ State : \_\_\_\_\_

19. **Parent's Declaration**

I (Mr/Mrs) \_\_\_\_\_ do hereby declare that the details given above are true and correct. I hereby promise that if my son/daughter admitted to this college, he/she will abide by the rules of this college and the day to day instructions of the Principal.

Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_

Mobile No: \_\_\_\_\_

20. **Student's Declaration**

I \_\_\_\_\_ hereby declare that the details given above are true and correct. I hereby promise that if I am admitted to this college, I shall abide by the rules of this college and the day to day instruction of the Principal.

Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Mobile No: \_\_\_\_\_

21. **For Office Use Only**

The applicant may be admitted/ rejected to the First year \_\_\_\_\_ programme.

Head of the Department

Date

PRINCIPAL

22. **UG Courses**

**BA English (Honours)**

**BSc Psychology (Honours)**

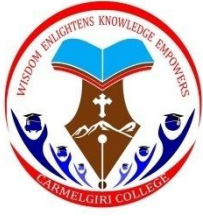
**B.Com –Commerce (Honours)**

**BSW (Honours)**

*(Note: Attach Self Attested Photocopy of 10<sup>th</sup> & 12<sup>th</sup> Standard Marks Card*

Application No: \_\_\_\_\_

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## CARMELGIRI COLLEGE ADIMALI-KERALA-685561

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AFFILIATED TO MAHATMA GANDHI UNIVERSITY U.O. NO.3462/3/2013 & APPROVED BY  
THE GOVERNMENT OF KERALA G.O(Ms) NO.313/2013

(Owned and managed by CMC Carmelgiri Province- Idukki)

Application for admission to the Post Graduate Programme for .....

### Admission details (Fill in As Appear In SSLC/ 10<sup>th</sup> Grade Card: Numbers 1 to 7)

1.Name of Student : \_\_\_\_\_

2.Father's Name : \_\_\_\_\_

3.Mother's Name : \_\_\_\_\_

4.Date of Birth: \_\_\_\_\_

5.Religion : \_\_\_\_\_ Caste : \_\_\_\_\_

6.Mother tongue : \_\_\_\_\_ Blood Group : \_\_\_\_\_

7.Gender : **Male / Female** Married : **Yes / No**

8.Name of the qualifying exam:(**REGULAR/OPEN/OFF CAMPUS**) \_\_\_\_\_

9.Number of chances appeared : \_\_\_\_\_

10. Course Desired: M.Com Finance & Taxation, MSW (Medical and Psychiatric Social Work, Community Development, Family and Child welfare)

### 11. Academic details: ( Degree Exam )

Name of Exam. : \_\_\_\_\_

Specify The University In Which You Have Graduated : \_\_\_\_\_

Name of College : \_\_\_\_\_

Permanent Register Number : \_\_\_\_\_ Passing Month: \_\_\_\_\_ Year: \_\_\_\_\_

Total Marks Obtained: \_\_\_\_\_ Grade: \_\_\_\_\_

(Note: Attach Self Attested Photocopy of 10<sup>th</sup> & Degree Marks Card)

**12. Address Details: (Parent/Local Guardian)**

Address : \_\_\_\_\_

Pin : \_\_\_\_\_ Dist. : \_\_\_\_\_ State : \_\_\_\_\_

**13. Parent's Declaration**

I (Mr/Mrs) \_\_\_\_\_ do hereby declare that the details given above are true and correct. I hereby promise that if my son/daughter is admitted to this college, he/she will abide by the rules of this college and the day to day instructions of the Principal.

Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_

Mobile No: \_\_\_\_\_

**14. Student's Declaration**

I \_\_\_\_\_ hereby declare that the details given above are true and correct. I hereby promise that if I am admitted to this college, I shall abide by the rules of this college and the day to day instruction of the Principal.

Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Mobile No: \_\_\_\_\_

**15. For Office Use Only**

The applicant may be admitted/rejected to the First year \_\_\_\_\_ programme.

Head of the Department

Date

Principal

**P.G Courses**

1. M.Com Finance &amp; Taxation

2. MSW