

Application form issued to



Application No. :

Registration No. :



Cell : 9787770236

Phone : 04328 - 290445, 290446

SRI SARADHA COLLEGE FOR WOMEN

Sri Saradha Nagar, NH - 45, PERAMBALUR - 621 113.

**APPLICATION FORM FOR ADMISSION TO
POST GRADUATE**Affix your
recently taken
passport size
photo here

Courses Applied for

1. Name :

2. Date of Birth

3. Community

OC

BC

MBC / DNC

SC / ST

4. Caste

5. Nationality

6. Sex

M

F

7. Mother Tongue

8. Marital status

Married

Unmarried

9. Aadhaar No..

10. Name of Parent / Guardian

11. Occupation of the parent

12. Address for communication

13. Annual income

14. If physically handicapped, specify

15. Break in study if any

16. Details of scholarship held

Cell No.

Pin

17. Distinction in Sports / NCS / NSS

18. Qualifying Examination passed :

University

College Studied

Year of Study

Class

18. Total marks in Part III only Out of

%

a.

b.

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

Note: No enclosures need be sent along with application.

Place:

Date:

Signature of the Parent / Guardian

Signature of the Applicant

For office use only

Certificates verified:

Admitted

TC	UG Provisional	UG Consolidated	Community
Spl. Category			

Signature of staff who processed the application

Principal.

Signature of head of the department