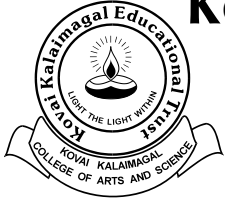


Application No. D

Admission No. with Date

Register No.



KOVAI KALAIMAGAL COLLEGE OF ARTS AND SCIENCE

(An Autonomous Institute, Affiliated to Bharathiar University, Coimbatore)
Re-Accredited with 'A' Grade by NAAC

Narasipuram Post, Thondamuthur (Via), Coimbatore - 641 109

☎ 0422-2970131, 2970132, 2970703

Fax : 0422 - 2970427 Mobile : 96005 64940



Application for Admission to the following courses

- B.Com.**
- B.Com (Computer Applications)**
- B.Com (Professional Accounting)**
- B.B.A. (Computer Applications)**
- B.Sc.Mathematics(Computer Applications)**
- B.Sc. Computer Science**
- B.Sc. Information Technology**
- B.C.A**

Affix
Passport Size Photo

1. Name of the Applicant :

2. Programme & Branch applied for :

3. Name of the Father / Guardian :

4. Address for Correspondence :

 Phone No.

5. Permanent Residential Address :

 Phone No.

6. Sex : Male / Female / Transgender

7. Date of birth : Age :

8. Aadhaar No. :

9. Mother Tongue : _____

10. Nationality / Religion : _____

11. Native place, District and State : _____

12. State if you belong to SC / ST / BC / MBC / DNC / Other Caste : _____

13. Particulars regarding Parent / Guardian :

a. Occupation and Office Address : _____

b. Annual Income : _____

14. Are you a Son / Daughter of Ex-Servicemen of Tamilnadu Origin? _____

For office use only	
Application received on : _____	
Interview on : _____	
Eligible / Not Eligible : _____	
Selected / Not Selected : _____	
Admitted on : _____	
Original Certificates received	
T.C.	<input type="checkbox"/>
Mark list - 10th	<input type="checkbox"/>
Mark list - 12th	<input type="checkbox"/>
Com. Cert.	<input type="checkbox"/>
Under Taking From Student	<input type="checkbox"/>

15. Marks obtained in the Qualifying Examinations

Parts / Subjects	Reg. No.	Yr. & Month of Passing	No. of attempts	Marks
Part I LANGUAGE				
Part II ENGLISH				
Part III				
1				
2				
3				
4				
VOCATIONAL COURSE				
1				
2				
3				
4				
TOTAL OUT OF 1200				
PERCENTAGE OF MARKS				

16. State whether hostel accommodation is required. YES / NO
 If Yes, Name of the Guardian & Phone no. : _____

17. Language under Part I desired : Tamil / Hindi / French / Malayalam
 (Tick your option)

18. Medium of Instruction in XII Std : _____

19. Extra curricular activities : _____

20. Are you physically handicapped?
 if yes, Give details : _____

21. School last studied : _____

CERTIFICATE

The above information is true and correct to the best of our knowledge. We agree to be governed by the rules & regulations of the College as in force and as may be revised from time to time.

Place :

Date : Signature of Parent / Guardian Signature of the Applicant

Date : Signature of the Admission in-charge Signature of the Principal