

APPLICATION FORM ISSUED TO:

APPLICATION No:

REGISTRATION NO:



## P.K.R ARTS COLLEGE FOR WOMEN

GOBICHETTIPALAYAM – 638 476.

APPLICATION FORM FOR ADMISISON TO  
B.Com., B.B.M., B.Com.(C.A.) B.A., Eng.Lit.(C.A.)

MAJOR	ALLIED :		PART I LANGUAGE :		MEDIUM:	TAMIL	ENGLISH
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1.	NAME																		
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2.	DATE OF BIRTH							3.	COMMUNITY	SC/ST	MBC/DNC	BC	OC
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4.	CASTE:				5.	NATIONALITY:			6.	SEX:	M	F
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7.	NAME OF PARENT / GUARDIAN (STATE RELATIONSHIP):	
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8.	ADDRESS FOR COMMUNICATION:	9.	IF PHYSICALLY HANDICAPPED SPECIFY	
		10.	ARE YOU SON/DAUGHTER OF EX-SERVICEMAN OF TAMILNADU ORIGIN	
		11.	ARE YOU OF TAMIL ORIGIN FROM ANDAMAN NICOBAR ISLANDS?	
		12.	DISTINCTION IN SPORTS / NCC / NSS	
	PIN <input type="text"/>	13.	NAME & LOCATION (DISTRICT) OF SCHOOL LAST STUDIED	

14.	QUALIFYING EXAMINATION PASSED: HSC OR EQUIVALENT :					
SUBJECT		MARKS*:	MAXIMUM	MONTH/YEAR OF PASSING	REGISTER NO:	No. OF ATTEMPTS
PART I : TAMIL			200			
PART II: ENGLISH			200			
PART III						
1.			200			

2.		200			
3.		200			
4.		200			
TOTAL		1200			

\* CALCULATE TO THE MAXIMUM OF 200

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.

Note : No enclosures need be sent along with application.

Place :

Date :                      SIGNATURE OF THE PARENT / GUARDIAN                      SIGNATURE OF APPLICANT

FOR OFFICE USE ONLY

CERTIFICATES VERIFIED:

HSC MARKS	COMMUNITY	TRANSFER
CONDUCT:	SPL.CATEGORY	

ADMITTED

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SIGNATURE OF STAFF WHO PROCESSED THE APPLICATION: ..... PRINCIPAL

SIGNATURE OF HEAD OF THE DEPARTMENT .....