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Admission No. with Date

Register No.





b. Annual Income:

KOVAI KALAIMAGA COLLEGE OF ARTS AND SCIENCE (An Autonomous Institutions, Affiliated to Bharathiar University)





Vellaimalaipattinam, Narasipuram Post, Thondamuthur Via, Coimbatore - 641 019,

Phone: 96294 03665 Fax: 0422-2970427 Affix APPLICATION FORM FOR ADMISSION TO PG COURSES Passport Size Photo M.Sc. Computer Science M.Com. Computer Applications M.Sc. Information Technology M.Com. International Business Name of the Applicant: 2. Programme & Branch applied for: Name of the Father / Guardian: 3. Address for Correspondence: Phone No. Father Mother Permanent Residential Address: Students Phone No. FOR OFFICE USE ONLY Male Transgender Female Sex: Application received on: Blood Group: Date of Birth: Age Interview on: Aadhaar No.: 8. Eligible/ Not Eligible: Mother Tongue 9. Selected / Not Selected: 10. Nationality / Religion: Admitted on: 11. Native Place, District and State: Original Certificates received 12. State if you belong to SC/ST/BC/MBC/DNC/Other Caste: 10th | 12th 13. Occupation of Parent/Guardian: UG Provisional Certificate a. Office Address: UG Consolidated Certificate **Under Taking** from Student Copy of Certificate Received Aadhar card Community Certificate

14.	Are you a Son	Daughter of Ex-Ser	vicement of Tamilnadu	Origin?			
15.	Are you of Tam Nicobar Islands	nil origin from Andaı S	man / :				
16.	6. Academic Performance						
	Course	Percentage of Marks	Class Obtained	Month & Year of Passing	Name of the Institute where studied		
	SSLC						
	HSC						
	Degree						
17.	State whether H	Hostel accommodation	on is required : YES	S / NO			
	If Yes, Name of	f the Guardian & Pho	one No. :				
18.	State whether E	Bus facility is require	ed : YES	$_{\rm S/NO}$			
	If Yes, Name of	f the Boarding Place	:		<i></i>		
19.	Extra curricular	r Activities	:				
20.	Are you physic	ally Challenged	: YES	S/NO			
	If Yes, Give det	tails	:				
			CER	FIFICATE			
			rect to the best of our evised from time to tir		ee to be governed by the rules & regulations of		
Plac	ee:	/					
Date	e:		Signature	of the Applicant	Signature of Parent / Guardian		
Date	e :		Signature of the	e Admission in-charg	e Signature of the Principal		