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Name of the Candidate

10

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PHOTO

P.B.No.5, Kakkode, Karakulam.P.O. Thiruvananthapuram. 695 564. India Phone: 0472-2 88 63 99 email: gkmes2340@gmail.com

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ADDITOATION	
APPLICATION NO	

Application for Admission to MBA full-time Programme

PERSONAL DATA

Age & Dat	te o	f Biı	rth																					
Sex											M		F											
Nationalit	y																							
Marital Status																								
Religion/ Caste*																								
*Attach copy of caste certificate in case of SC/ST candidates																								
Name & Occupation of Father / Guardian																								
Annual Income																								
Relationship with the candidate																								
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Course Period (year)				Name of Examination passed and							Class/ Rank		Total		Result**		%Marks							
Matriculation					(year	1)	Board / University							Kank		Marks		Secured		Secured				
school																								
+2 or Equivalent							Main/Subjects																	
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Graduation or Equivalent					Main/ Subjects						.			Part I		Part		Part I						
College					Board /Uty						٠			Aggre		Aggr		Aggre						
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Post Graduation or Equivalent College					Main/ Subjects Board /Uty																			
**For B.A,B.(rks for	r part								degr	ees ag	gregat	te ma	rks ca	n be e	entere	ed.

^{**}For B.A,B.Com and B.Sc degree Examination marks for part are to be entered separately. For all other degrees aggregate marks can be entered. Marks obtained till date may be entered in case of candidates appearing for their final examination.

K-MAT/	CAT/C-MAT DETAILS(Attach true copy	of Scorecard)
ROLL NO.	K-MAT/CAT/C-MAT SCORE	YEAR & MONTH
A	ADDITIONAL QUALIFICATIONS,IF AN	NY
HOSTEL ACCOMODATI	ON REQUIRED Yes No	
	ADDITIONAL INFORMATION, IF AN	Y
	DECLARATION BY THE APPLICAN	า า
	here by declare that all the informa ledge and that I understand that any misry candidature.	
Place:		Signature:
Date:		Name :
	DECLARATION BY THE GUARDIA	N
[, I agree to all the above conditi	fully aware of the above declaration	n and have understood the same
Place:		Signature:
Date:		Name :
	FOR OFFICE USE	
	Admission Details	
Date Admission	on No. Category	Fees paid Rs.
GUARDIAN CONTACT PHONE NO		
1	DETAILS OF DOCUMENTS SUBMITTI	ED
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