

PATTOM THANUPILLAI MEMORIAL COLLEGE FOR ARTS & SCIENCE

MARUTHOORKONAM
KOTTUKAL P.O. BALARAMAPURAM - 695501
Phone : 0471 - 2267420, 9447704672

APPLICATION FORM FOR ADMISSION TO DEGREE COURSE

Fields marked * are mandatory

A. Course Details

1. Category of Course*
2. Name of Course *
3. Optional Subject
4. Subsidiary Subject
5. Second Language
6. Study Centre

B. Personal Details

1. Name of Candidate (as per SSLC)
2. Date of Birth (as per SSLC) (dd-mm-yyyy) 3. Sex
4. Nationality
5. State
6. District
7. Father / Guardian *
8. Parent's Occupation
9. Family Income/Month
10. Contact address (with PIN)*
11. Permanent address (with PIN)
12. Religion 13. Caste
14. Reservation (If yes specify category)
15. Eligible for fee concession Yes No
16. Mother Tongue
17. Marital Status
18. Phone 1 * 19. Phone 2

20. Mobile

21. Email*

21. Photo

C. TC Details

1. Name of the Institution

2. Course

3. TC number

4. Date of issuing TC (dd-mm-yyyy)

D. Matriculation Details

1. Institution last attended

2. University affiliation of the Institution

E. Employment Details

1. Are you employed ? Yes No

2. Designation

3. Employer

4. Office Address

F. Qualification Details

1. Name of the Course

2. Name of Institution

3. Register Number

4. Month & Year of passing

5. Name of the University/Board

G. Qualifying Mark Details

1. Marks Secured Part I Part II Part III

2. Remarks (if any regarding the parts)

3. Total Marks secured

4. Maximum marks