



St. PETER'S ARTS AND SCIENCE COLLEGE

Administered by Kumbakonam Diocese Society
G.O.Ms.No:91/28.05.2019 AFFILIATED TO BIARATHIDASAN UNIVERSITY, TIRUCHIRAPPALLI.
Melaneduvai, Andimadam – 621 801, Mobile: 6374573094.

Appl. No.

GUIDELINES TO FILL IN THE APPLICATION

APPLICATION FOR U.G. COURSES
20 -20

(USE CAPITAL LETTERS ONLY)

- Incomplete application will be summarily rejected. Please tick wherever necessary
- Please enclose the following certificates.
 - 10th, 11th, 12th Mark Sheet & 12th TC Originals.
 - Community, Income, Aadhaar, Bank pass book (Xerox).
 - 3 Passport Size Photos.
 - Letter from Parish Priest (only for Roman Catholic students).
 - If differently abled Produce, Copy of Certificate (Xerox).

Principal

Affix Passport Size Photo

1	Name of the Applicant - English							
	- Tamil							
2	Course Applied for		<input type="checkbox"/> B.A. English	<input type="checkbox"/> B.Com (Commerce)	<input type="checkbox"/> B.Sc., Computer Science			
			<input type="checkbox"/> B.C.A	<input type="checkbox"/> B.Sc., Mathematics	<input type="checkbox"/> B.Sc., Physics			
3	Date of Birth	DD MM Year	4. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			5. Blood Group		
6	Community (as in T.C.)		<input type="checkbox"/> OC	<input type="checkbox"/> BC / OBC	<input type="checkbox"/> MBC / DNC	<input type="checkbox"/> SC	<input type="checkbox"/> SCA <input type="checkbox"/> ST	
			Please Mention your Sub- Caste					
7	Religion		<input type="checkbox"/> Roman Catholic (RC)	<input type="checkbox"/> Christian	<input type="checkbox"/> Hindu	<input type="checkbox"/> Muslim		
			<input type="checkbox"/> Others (Specify)					
8	Dalit Catholic / SC Converted Catholic		<input type="checkbox"/> Yes <input type="checkbox"/> No					
9	Nationality		<input type="checkbox"/> Indian Mother Tongue					
	Indian		State	District	Town	Village		
10	EMIS ID :		Aadhaar No.					
11	Differently Abled		<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes) <input type="checkbox"/> Visually <input type="checkbox"/> Hearing <input type="checkbox"/> Orthopedically <input type="checkbox"/> Dyslexia					
12	Special Category		<input type="checkbox"/> Yes <input type="checkbox"/> No (if yes) <input type="checkbox"/> Ex-Serviceman <input type="checkbox"/> Refugee <input type="checkbox"/> Orphan <input type="checkbox"/> Semi-Orphan					
13	Father's Name (Tamil -English)		Occupation:		Income:			
	Mother's Name (Tamil - English)		Occupation:		Income:			
	If Ex-Serviceman		Ex-Serviceman No Regiment Rank					
14	First generation graduate in Your family		<input type="checkbox"/> Yes <input type="checkbox"/> No		Name of the school, Place last studied		<input type="checkbox"/> Urban <input type="checkbox"/> Rural	
	Medium of Instruction in +2		<input type="checkbox"/> Tamil <input type="checkbox"/> English		T.C. No..... Date.....			
	Board of Examination Passed		<input type="checkbox"/> HSC <input type="checkbox"/> CBSE <input type="checkbox"/> ICSE Year of Passing:					
	Extra Curricular Activities		<input type="checkbox"/> NSS <input type="checkbox"/> NCC <input type="checkbox"/> Sports <input type="checkbox"/> Others					
15	Language I	Language II	Subject 1	Subject 2	Subject 3	Subject 4	Total marks obtained / Maximum marks	Total marks obtained / Maximum marks (without Languages)
		English						
	Marks.....							
16	Do you have merit certificate related to fine arts as Drawing, Animation, Photography, Music etc., <input type="checkbox"/> Yes <input type="checkbox"/> No							
	If yes, please attach photocopies along with the application form.							
17 Address For Communication	Present Address :			Guardian's Address :				
	PIN :			PIN:				
	Student Mobile No :			Guardian Mobile No:				
	Student E.mail ID :							
Parent's Mobile No:								

DECLARATION

I Promise to abide by the rules and regulations of the college. All the particulars stated in this application are true to the best of my knowledge and belief.

Date

Signature of the Applicant

UNDERTAKING BY PARENT OR GUARDIAN

I promise to pay my word's fee to the college and I take responsibility for his / her progress in studies, behaviour and regular attendance.

Date

Signature of the Parent / Guardian