

CAT / XAT / MAT / KMAT SCORE.....

APPLICATION FORM

	Affiliated to RG Approved by KN	GUHS (Bangalore) NC & INC New Delhi Application No.
ilaa	cation for Admis	Academic Year Ssion to
B.So B.So B.So B.So B.Co	c. (Biotech, Gen, Biocher c. (Microbio, Gen, Bioche c. (Biotech, Zoo, Chem) c. (CS, Maths, Statistics)	m) M.Sc.(Biotechnology) D.Pharm BPT em) M.Sc.(Microbiology) B.Pharm MPT MIB.(Master in International 3usiness) Pharm D GNM (General Nursing- Midwifery) Passport Photo Graph
1.	Name of the Applicant (In block letters)	
2.	Father's Name	
3.	Mother's Name	
4.	Sex	Male Female
5.	Date of birth	Date Month Year
6.	Mother Tongue	
7.	Nationality	Religion Religion
8.	Passport Number	Validity Validity
9.	Category	SC Any other Category (please mention in the box provided)
10.	Marital Status	Single Married Divorced Widowed
11.	Permanent Address	
12.	Local Address	Parent / Guardian's Tel./ Mobile: Email:
	Name and Address of the	
13.	Name and Address of the Institution last studied	<u> </u>
14.	Details of Qualifying Examinations	Exam Passed Name of the Board / University Year of Passing Combination Regd. No % of Marks SSLC
		PUC or Equivalent
		DEGREE / PG
15.	Medium of instruction	

17.	Documents to be submitted [original + 5 sets of photocopy, please mark in the box for documents submitted]		
	Marks Card of qualifying exam 6 (six) PP size photos 2(two) Stamp size photos Copies of Passport or equivalent exam		
	Copy of Proof of Date of birth Transfer Certificate Eligibility Certificate (In case of Foreigners)		
	Migration Certificate Copy of Proof of Address Self Addressed envelope (3 nos)		
18.	Language Studied at 10+2 level		
	Kannada Hindi Sanskrit		
	Telugu Malayalam Tamil Additional English		
19.	Languages Opted at Degree		
	Kannada Hindi Sanskrit		
	Telugu Malayalam Tamil Additional English		
20.	Proficiency in Cultural / Sports		
21.	Do you seek admission to the Hostel Yes No		
22.	Any Other Information		
DECLARATION BY THE CANDIDATE			
I have read all the rules and regulations that are in the prospectus and shall abide by them.			
	Place Signature of the candidate		
	Date		
DECLARATION BY THE PARENTS			
	I shall be responsible for the payment of all fees and shall not ask for refund of fee, paid in case of discontinuation of the course or cancellation.		
	I shall also stand responsible for the good conduct and good behavior of my ward and I shall ensure that he/she attends all the courses conducted from time to time and class tests and viva regularly during the period of his / her study in the college.		
	I understand that a student may be asked to leave the college at any time for his / her misbehavior and irregular attendance. Further I also undertake to abide by the terms & conditions.		
	Place Signature of the parent		
	Date Father/Mother/Guardian		
	For Office Use		
Verified and found correct			
	The candidate may / may not be admitted toAdmission Officer		
	Adminoration officer		
	Admitted to		
	Fee collected Rs.		
	Reciept No Date:		

Cashier Principal