

Date:

Name & Address:

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SNDP YOGAM SATHABDI SMARAKA COLLEGE

Kunnapalli. P.O., Perinthalmanna - 679 322

E-mail: sndpysscollege@gmail.com. Phone : 04933-232275, 8281683960

MALAPPURAM DISTRICT.
(Affiliated to the University of Calicut)

No

Date:

APPLICATION FOR ADMISSION TO PG / DEGREE COURSE UNDER MANAGMENT QUOTA (20 -20)

1. Name of the Applicant	
2. Date of Birth and Age	
3. Name of Parent / Guardian (a) Relationship of the applicant to the Guardian	
(b) Occupation of the Parent / Guardian	
4. Permanent Address	
5. Address for Communication	
6. Religion and Caste	
7. Native place with Taluk and District.	
8. College in which the student studied last with year of Study	
9. No. of times appeared for the Degree Examination / +2 & Mark secured for the qualifying examination (Copy of the certificate to be attached)	
10. Choice of the course I Choice II Choice III Choice	
11. Recommended by Perinthalmanna SNDP Union With Address and Telephone No.	

Place:

Date:

Signature of the Applicant