Application No.						Ro	oll No	•					
AAADHAVAAA COLLEGE OF ARTS AND SCIENCE (Affiliated to Bharathidasan University, Thiruchirappalli) CO- Education AALATHUR, MANAPPARAI - 621307, TRICHY (Dt) - Mobile : 99429 88673, 99429 77555 E.mail :info@aadhavancollege.org Web : www.aadhavancollege.org													
APPLI	CATION	FORM	FOR A	DMI	SSIC)N 1	02	20		/ 20	0		
UG COURSES													
B.A.,Tamil B.A.,English	BBA.,	3.Com., B.Con	n.,CA BC	СА., В.	Sc.,(CS)[B.S	.,Maths	В	Sc.,Phy	ysics	B.Sc.	.,Chemis	stry
PG COURSES M.A COURSE APPLIED CHOICE 1		.Com.,						X YOL				X YOUF	
CHOICE 2					+	PASSP PH	IOTO	SIZE			ORT S IOTO	IZE	
Name													
Name of Parent / Guardian (Specify Guardian Relationship)													
Occupation of Parent / Guardian						Annual Income							
Date Of Birth	Day Month Ye			⁄ear	Ar Place of Birth & District								
Gender	Male	Female	Trans	gender	ler Blood Group								
Religion	Aadhar No.							Γ					
Community	SC/ST] MBC/DNC [BC[;	Cas	te	1	-		1	1	1
Nationality	INDIAN / NRI				Mother Tongue								
Address for Communication : Permanant Address				Temporary Address									
				_									
			т т						1	1	1		<u> </u>
PIN				Mobi	PIN								
E-Mail ID.													
Physically Challenged Yes No					Ward of Ex -Service Man Yes No								
Marital Status				Single Married									
Identification Marks				1.									
				2.									
Scholarship Requirement				Yes[Yes No								

Distinction in Sports / NSS/ NCC/ Co - Curricular Activities										
Need any Extra C		ity Tra	aining	Yes No						
Name and Locat last studied (+2)	· · ·	fscho	ool / college	(If Yes, Specify)						
Medium of Instru	•			Tamil English						
		amin	nation passed : H.Sc		<u> </u>					
Subject	Marks		Maximum	Month &Year of	No.of	Register Number				
-	Obtained	!	Marks	Passing	Attempts					
Part I Tamil	1	ļ			i					
Part II	i			++		+				
English										
Part III		I								
1.	l	!	 							
2.										
3.										
4.					i	1				
Total				++		1				
Marks Statemer	nt		L	<u> </u>						
			Marks Secured	Maximum Marks	Percentage	e				
 (b) State whether y for the entire six set Higher Secondary Total Marks in Part I declare that I submit that I will a If any incident of ratio 	n ajor s ue Education nder Studies s are on the grad vou have furnishe emesters Ye Certificate Numb t III at all the particula abide by the rules agging comes to	de poir ed the es per / U ars fur s and the no	int system convert the e mark statement and JG rnished above are true d regulations of the co notice of the authority	em in to marks and fill em in to marks and fill percentage of marks ue and correct to the be blege. the concerned studen sfactory, the authority v	- up the columns	s dge.				
Date : Signature of the Paren			nature of the Parent	t / Guardian	Signature of	Signature of the Applicant				
Reference :		<u> </u>								
				E USE ONLY						
Course Admitte					_					
Fee - Receipt N	o.& Date :									
Roll Number	:				_					
Remarks	:									
Original Certific										
	k Sheet									
Photo Copy	. <u> </u>									
	Community]								
TC Mar	k Sheet 🦳					PRINCIPAL				