

P.K.N. ARTS & SCIENCE COLLEGE

(A Self-financing Co-educational Institution Affiliated to Madurai Kamaraj University)

P.O.Box. No.28, P.K.N. Nagar, Vidathakulam Road, Tirumangalam - 625 706 MADURAI DISTRICT. Phone : (04549) 208098

Website : www.pkncollege.com e-mail : pkncollege@yahoo.in

Passport Size Photograph

APPLICATION FORM FOR UNDER GRADUATE COURSE

Na	me of the Course						0	Inline Application	l				
1.	NAME												
2.	Date Of Birth				3.	Age		yearsı	months	4.	Sex	М	F
5.	Nationality						6. Religion						
7.	Community SC / ST MBC / DNC BC OC 8. Caste												
	Father's Name						Occupation			Annual Income			
9.	Mother's Name												
	Guardian (state of relationship)												
10.	Address for Communication				Phone / Contact					STD			
11.	Mail id :												
	studied with Month and year of passing :												
12. 13.													
14.													
SUBJECTS					MAF	RKS	REGISTER No.			MONTH & YEAR OF PASSING			
Part I Tamil													
F	Part II En	•											
F	art III (a)						.						
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	(u)			TAI									

or other aid from the school last attended?	YES / NO
(b) if yes, give details	
(a) Does he / she intend to apply for any fee concession or scholarship or other aid?	YES / NO
(b) if yes, give details	
(a) Are you a physically handicapped?	YES / NO
(b) If yes, State the Nature and furnish the xerox copy or the certificate obtained from authorised Medical officer together with the photograph	
(a) Are you a son / daughter of Ex-Service man of TamilNadu orgin?	YES / NO
(b) If yes, produce a xerox copy of the evidance	
(a) Whether the candidate has represented his / her school in games or sports?	YES / NO
(b) If yes, give full details of distinctions obtained, prizes won in sports	
Does the applicant need Hostel Accomodation?	YES / NO
	 (b) if yes, give details (a) Does he / she intend to apply for any fee concession or scholarship or other aid? (b) if yes, give details (a) Are you a physically handicapped? (b) If yes, State the Nature and furnish the xerox copy or the certificate obtained from authorised Medical officer together with the photograph (a) Are you a son / daughter of Ex-Service man of TamilNadu orgin? (b) If yes, produce a xerox copy of the evidance (a) Whether the candidate has represented his / her school in games or sports? (b) If yes, give full details of distinctions obtained, prizes won in sports

DECLARATION

I declare that the particulars given above are correct and that I agree to abide by the rules and regulations of the college and to take part in curricular and co - curricular activities of the College to my ability. I assure you that I will not take part in political and unlawful activities both inside and outside the college. I shall not claim any refund of fees paid to the college and shall pay the semester fees due if I chooses to leave the institution at any time.

Signature of the Applicant.

I agree to abide by the rules and regulations of the college. I shall not claim any refund of fees paid to the college, if my ward chooses to leave the institution at any time. I shall pay the semester fees due, if my ward chooses to leave the institution at any time.

Place: Signature of the Parent / Guardian Date:

Note: 1. All the columns in this application should necessarily be filled in.

2. Application which is defective in particulars will be rejected.

To be filled in by the Office Course : Admission No :	Payment of fees	Amount Paid	Receipt No.	Date
Roll No : **Mathematical Roll No : **Mathematical Roll No : **A Concession in tuition fees : % / NIL : **A	Application Registration fee			
b) Certificates Submitted : YES / NO c) Lecturer who verified the documents : Signature : Name :	Tuition and Special fee			

Order of the Principal

Signature :

Date :