

# SRI KALISWARI COLLEGE

Application No.

(Autonomous, Affiliated to Madurai Kamaraj University)

A. Meenakshipuram, Anaikuttam Post, **SIVAKASI – 626 130**

Phone Nos. 04562 – 232648, 232264

E-Mail : [kaliswaricollege@gmail.com](mailto:kaliswaricollege@gmail.com) Website: [www.kaliswaricollege.org](http://www.kaliswaricollege.org)Space for  
Photo of the  
candidate

## P.G.APPLICATION FORM

Note : 1) All the entries should be made in **Block Letters** and in the **Candidate's own handwriting**.

2) Incomplete application forms will be rejected.

3) **Separate application form should be submitted for EACH COURSE DESIRED**

1. Name of the Course

2. Name (in **BLOCK LETTERS**) (spell as in the +2 Mark Sheet)

Father's Name

3. Date of Birth :

(As in the SSLC Mark Sheet)

Sex\*

Male

Female

Transgender

4. Nationality :

Aadhaar No.

5. Religion :

6. a) Community\*: (i) OC (ii) BC (iii) MBC (iv) DNC (v) SC (vi) ST 

b) Caste :

7. Blood Group :

8. a) College of UG study :

b) Period of U.G. study :

Semester

Non Semester

c) Name of the University :

d) Name of the Qualifying degree :

Reg. No.

e) Year of Passing with Percentage of marks /  
If waiting for result, % of Marks till V<sup>th</sup> Sem.

%

9. Information about Parent / Guardian:

Parent / Guardian	Name	Educational Qualification	Occupation	Annual Income (Rs.)
Father				
Mother				
Guardian (specify the relationship)				

### Permanent Residential Address:

### Address for communication:

Pin Code

Taluk District

Phone No. with STD Code:

Mobile No.

E-mail id:

Pin Code

Taluk District

Phone No. with STD Code:

Mobile No.

E-mail id:

10. Do you require Hostel Accommodation? :

**YES / NO**

\* Tick the item applicable

**11.DETAILS OF MARKS OBTAINED IN DEGREE EXAMINATION:-**

SUBJECTS	MARKS OBTAINED	MAXIMUM MARKS	Grade awarded	Class Obtained
<b>Part - I</b> Language I Alternative Subject				
<b>Part - II ENGLISH</b>				
<b>PART - III *</b>				
<b>PART – IV *</b>				
<b>PART – V *</b>				

[Xerox copy of Statement of marks duly attested must be enclosed (upto V / VI Semester)]

12. Break in studies, if any

i) \_\_\_\_\_ years      ii) From \_\_\_\_\_ To \_\_\_\_\_      iii) Reason \_\_\_\_\_

13. Do you belong to any of the following? If so, produce necessary certificate

a) Physically challenged person	: Yes / No	c) Son / Daughter of Ex-Service man	: Yes / No
b) Refugee	: Yes / No	d) Participation in Sports (State, District) / NSS / NCC	

**DECLARATION**

I declare that all the particulars furnished above are true and correct. I submit that I will abide by the rules and regulations of the College. **I also agree not to insist on the refund of the fee paid by me in case I discontinue my studies from the college due to any reason.**

Station :

Signature of the  
Parent / Guardian

Signature of the  
Applicant

Date :

**FOR OFFICE USE ONLY**

**CERTIFICATES SUBMITTED**

Degree	Marks	Transfer	Conduct	Community	Sports	Blood Group	SPL Category

Signature of Staff who processed the Application Forms \_\_\_\_\_ [Name \_\_\_\_\_ ]

Date of admission \_\_\_\_\_

Admitted to \_\_\_\_\_

**ORDERS OF THE PRINCIPAL**

Details of Fee	Receipt No.	Date	Initial of the Cashier	Admission No.
Registration Fee				
Tuition Fee & Special Fee				

\* Mention the Name of the major and ancillary subjects