

ENATHI RAJAPPAA ARTS AND SCIENCE COLLEGE

PATTUKKOTTAI - 614 615. Ph : 04373 - 222730, 223730 & 224730

(Affiliated to Bharathidasan University, Trichy)

Mail : ercpkt@gmail.com Website : www.enathirajappacollege.com

	UG APPLICATION	ON FOR ADMISSION Year: 20 - 20						
APPLICATION No. 3325 ADMISSION No. :								
	COURSE :	Photo						
1.	Name in full (in Block Letters) :							
2.	Sex :	Male / Female						
3.	Date of Birth							
4.	Address for Communication :							
	Father's Name							
	Mother's Name							
	Phone No. / Mobile No.							
5.	Nationality							
6.	Religion :							
7.	Caste :							
8.	Community :	SC / ST / BC / MBC / OC / DNC						
9.	Name of the Parent / Guardian :							
10	Occupation of the Parent / Guardian :							
11.	Annual Income of the Parent / Guardian :							
12.	Mother Tongue :							
13.	Place of Birth :							
14.	Institution Last Studied :							
15.	Qualifying Exam. Passed :							
16.	EMIS Number :							
17.	Aadhar Number :							
tie	Bank A/C No :							
	IFSC Code :							
	Bank Name							

16.	Particulars	of	made
		U 2	111 11 11 11 11

Regn No.

Subject	Marks Obtained	Maximum Marks	Month & Year of Passing	No. of Attempts				
			The state of the s					
			3325					
Class:	ass:Out of:							
18. Extra Curricular A (Sports, Games & Oth I Solemnly assur conduct formulated by such matters which sh.	ers Specify) e that the particular the college from time	s given above are co	errect. I shall also ab decision of the colle	ide by the code of ge authorities in all				
Date:			Signature of the Ap	policant				
			3					
	DECLARA	ATION BY THE PAR	RENT					
I, hereby guarantee that my son / daughter if give admission in Enathi Rajappaa Arts and Science College will not take part in any activity prejudicial to the interest of the institution. I vouch for his / her good behaviour and conduct during the course of his / her study. If he/she violates any of the rules and regulations my son/daughter and I shall abide by the disciplinary action taken by the college authorities. The decision of the authorities in this respect shall be final.								
Place:								
Date:			Signature of the Pa	rent / Guardian				
	FOR	OFFICE USE ONLY						
Date of Registration	Ľ		Date of Interview.					
Admitted in:			Pri	ncipal				

Note: Any incorrect information furnished will disqualify the candidate from admission.