



**SACRED
HEART
COLLEGE**
Autonomous



SACRED HEART COLLEGE (AUTONOMOUS)
THEVARA, KOCHI -13
Tel: 0484-2663380
Fax: 0484-2663813
Email ID: office@shcollege.ac.in
www.shcollege.ac.in

Application No. : 2403680
Challan No. : order_OEFz3Q4vpN5Mdp
Date : 18/06/2024

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Admission No.	
Programme	
Class No.	

APPLICATION FOR ADMISSION TO UNDERGRADUATE PROGRAMMES 2024 - 2025

- 1 Name : ABHIRAMI A
- 2 Gender : FEMALE
- 3 Date of Birth : 25-05-2006
- 4 Nationality : INDIAN
- 5 Domicile State : KERALA
- 6 Religion : HINDU
- 7 Caste : EZHAVA
- 8 Category : EZHAVA, THIYYA AND BILLAVA (ETB)
- 9 Name of Father : Sabu Rajan
Occupation : Self-Employed
- 10 Name of Mother : Ajitha V
Occupation : Homemaker
- 11 Permanent Address : vishnu bhavanam ,
Kallelibhagam, karunagappally
KERALA , INDIA, 690519
- 12 Present Address : vishnu bhavanam ,
Kallelibhagam, karunagappally
KERALA , INDIA, 690519
- 13 Land Phone : 07356593877
Mobile : 7356593877
- 14 E-Mail : abhijith251324@gmail.com
- 15 Eligibility For Bonus Marks :
- 16 Sponsored by Union Territory of Lakshadweep : No
- 17 Claim for Reservation :



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Quota	
Rank No	
Additional Language	
Signature	

Exam	Reg. No	Year	Name of Board	Marks		
				Percentage	Secured	Maximum
Plus Two	23034091	2024	KERALA STATE BOARD	85.25	1023	1200
X	489894	2022	KERALA STATE BOARD	85.00		-

Statement of Plus Two Marks

Name Of Subject	Marks Secured	Maximum Marks
ENGLISH	146.00	200.00
HINDI	198.00	200.00
BUSINESS STUDIES WITH FUNCTIONAL MANAGEMENT	180.00	200.00
ACCOUNTANCY WITH COMPUTER ACCOUNTING	156.00	200.00
ECONOMICS	157.00	200.00
COMPUTER APPLICATION COM	186.00	200.00
Total Marks	1023.00	1200.00

18 No.of Chances taken to pass plus two : 1

19 Preference Details

Preference No	Programme	Second Language
1	BBA (HONS) INTEGRATED MARKETING AND NEW MEDIA SELF-FINANCE	
2	BBA (HONS) BUSINESS ANALYTICS SELF-FINANCE	
3	B Com (HONS) FINANCE AND BUSINESS ANALYTICS SELF-FINANCE	
4	B A (HONS) ECONOMICS AIDED	
5	B Com (HONS) FINANCE & ACCOUNTING SELF-FINANCE	
6	B Com (HONS) FINANCE AND TAXATION SELF-FINANCE	

DECLARATION

I hereby declare that the information furnished above is true to the best of my knowledge. If granted admission, I agree to abide by the rules and regulations of the College

Place :

Date :

Signature of Parent/Guardian

Signature of Candidate

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The applicant may be admitted to the first semester

Programme :

Second Language :

Date :

Head of the Department

Principal