Ramakrishna Mission Vivekananda College, Evening College (Autonomous)

70-72, Sir P.S Sivasamy Salai, Mylapore Chennai - 600 004.

Ph: 044-2499 2815, E-mail: ecincharge@rkmvc.ac.in, Website: www.rkmvc.ac.in (Re-accredited by NAAC with 'A+' Grade)

(Re-accredited by	NAAC with 'A+' Grade)			
APPLICATION FOR ADMISSION TO	B.ComGeneral	2021 -	2022	
	Applica	tion No. 21E	CU-00648	
Register No. (Class XII Exam) 3785533	Student Aadhaar	594749419	158	
CANDIDATE DETAILS :				
1) Name (In BLOCK LETTERS): KISHORE KUMAR A		-		
2) Date of Birth (DD-MM-YYYY): 08-09-2003 3) Age: 17 Y	ears 10 Months	8		
4) Blood Group: A1+ve 5) Nationality	: Indian			
6) Place of Birth (Town,District,State) : Mylapore,Chennai ,Tamil Nadu				
7) Personal marks of identification: a) Mole in right leg thumb			1	
b) Mole in left side chest				
8) Are you differently-abled or Dyslexia/ Autistic / with any disability?	No (If yes Specify):			
ADDRESS DETAILS :	PERSONAL DETAILS :			
9) Address for Communication:	10) Mother Tongue: Tamil			
32/67 appar swamy koil street				
Mylapore				
	12) Community: BC			
vistrict: Chennai 13) Are you from: Urban				
State: Tamil Nadu Pin Code : 600004				
Mobile Number 9840946867				
14) Language Chosen for Part-I : Tamil				
CLASS XII DETAILS:	23) Particulars of Marks Obtained in Class XII :			
15) Name of the School : dominic savio matriculation higher	Subjects	Out of	Marks	
16) Name of the Board : TNHSC		(Max.Marks)	Obtained	
17) Month & Year of Passing : April-2021	Language : German	100.00	85.33	
18) Medium in School: English	English	100.00	77.33	
19) Stream: General	Core Subjects			
20) Passed in 1st Attempt: Yes	1. Business Maths	100.00	74.22	
21) Was there a break in your Studies? No	2. Economics	100.00	72.67	
(If Yes, Reason):	3. Accountancy	100.00	77.33	
22) Extra Curricular Activities in School (NCC, NSS, Rotaract,	4. Commerce	100.00	74.89	
Sports,etc)	Grand Total(Core Subjects Only)	400.00	299.11	

FAMILY DETAILS:				
Family Background	Father	Mother	Local Guardian (If applicable)	
Name	ASHOK G	SATHYA A	Ashok	
Occupation	Private Sector	Not working	Not working	
Annual Income	300000.00	0.00		
Residential Address	32/67 appar swamy koil street mylapore,chennai-4	32/67 appar swamy koil street mylapore,chennai-4		
Office Address	42/1 vanniampathy street, mandhaveli ,chennai 28			
Phone No.	9790877815	8608519345	9790877815	
Email Id	ashokgovindhan5@gmail.com	sathya860851@gmail.com	ashokgovindhan5@gmail.com	

24) PART III

74.78

U	ndertaking by the Parent / Guardian :				
1.	We have not suppressed any details in this form and declare that all the details furnished in this application form including marks are accurate and correct.				
2.	If anything found incorrect at the time of scrutiny or in future, my son / ward will forfeit his seat with immediate effect and will be debarred from further studies.				
3.	My son/ward shall abide by the rules and regulations of the college and I also undertake that if he fails to be present for five consecutive working days without prior written permission, he will forfeit his seat.				
4.	My son/ward will continue his studies for the full duration of the course. If my son/ward discontinues his studies in the middle of the course, for any reason whatsoever, causing a permanent vacancy in a self-supportive course, I undertake to pay the fee due for this course.				
5.	I am aware that the admission of my son/ward is subject to the fulfillment of eligibility norms of the University of Madras.				
6.	6. My son/ward will see the notices posted on the College Notice Board regularly and assure that ignorance on our part will not be an excuse.				
7.	I am fully aware of the discipline standards expected in a Ramakrishna Mission Campus and I assure that my son/ward will fully abide by it.				
I	undertake to abide by the above conditions.				
	ASHOK G				
	Name of the Parent / Legal Guardian and relationship with the student. Signature of the Parent / Guardian (with date)				
	have read the above undertaking given by my parent / guardian and I shall abide by it.				
	Signature of the Student (with date)				
	FOR OFFICE USE ONLY				
	COURSE:				
	INTERVIEW DATE: ADMIT				
	DEPARTMENT ROLL NO				

THREE (3) xerox copies of both sides of the registered form are to be produced at the time of admission in the college.

PRINCIPAL

CERTIFICATES VERIFIED AND CHECKED BY: