



PHOTO

REGISTRATION NUMBER	PROGRAMME	MAHE RANK	ADMISSION CATEGORY	
			GEN	OTHERS

STUDENT NAME (AS IT APPEARS IN THE QUALIFYING EXAMINATION MARKS CARD)

DATE OF BIRTH			GENDER (TICK ONE)		BLOOD GROUP	MARITAL STATUS (TICK ONE)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DATE	MONTH	YEAR	MALE	FEMALE		MARRIED	UNMARRIED

EMAIL ID	MOBILE NUMBER

FATHER'S NAME	MOTHER'S NAME

NATIONALITY	STATE OF DOMICILE

RELIGION	AADHAR NUMBER	MOTHER TONGUE

PROFESSION OF FATHER / GUARDIAN	RELATIONSHIP OF GUARDIAN TO STUDENT

GUARDIAN'S NAME	CORRESPONDENCE TO BE SENT TO (TICK ONE)	
	PRESENT ADDRESS	PERMANENT ADDRESS

PRESENT ADDRESS OF PARENT/GUARDIAN										PERMANENT ADDRESS OF PARENT/GUARDIAN									
STATE										STATE									
PIN CODE										PIN CODE									
MOBILE NUMBER OF FATHER / GUARDIAN										MOBILE NUMBER OF MOTHER / GUARDIAN									
<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>										<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>									
E-MAIL ID (FATHER / GUARDIAN)										E-MAIL ID (MOTHER / GUARDIAN)									

DETAILS OF 10+2	
MONTH & YEAR OF PASSING	
SCHOOL / COLLEGE	
BOARD / UNIVERSITY	

10+2 MARKS			
SUBJECT	MARKS MAXIMUM	MARKS SECURED	% OF MARKS
TOTAL			

TO BE FILLED BY STUDENTS ADMITTED TO LATERAL ENTRY / POSTGRADUATE

DETAILS OF DEGREE/DIPLOMA

DEGREE / DIPLOMA	COLLEGE
MONTH & YEAR OF PASSING	UNIVERSITY

MARKS DETAILS

TOTAL MARKS MAXIMUM (I TO FINAL)	TOTAL MARKS SECURED (I TO FINAL)	% OF MARKS	TOTAL FAILURES

TO BE FILLED BY FOREIGN, NRI OR NRI SPONSORED STUDENTS ONLY

CATEGORY (TICK ONE)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FOREIGN	NRI	SPONSORED

CITIZENSHIP (COUNTRY WHOSE PASSPORT IS NOW HELD – FOR FOREIGN/NRI CANDIDATES)

NAME OF THE SPONSORER (FOR SPONSORED CANDIDATES)

RELATIONSHIP WITH THE SPONSORER

PASSPORT DETAILS

NUMBER					
<input type="text"/>					
DATE OF ISSUE			VALID UPTO		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DATE	MONTH	YEAR	DATE	MONTH	YEAR
PLACE OF ISSUE					
<input type="text"/>					

VISA DETAILS

NUMBER					
<input type="text"/>					
DATE OF ISSUE			VALID UPTO		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DATE	MONTH	YEAR	DATE	MONTH	YEAR
PLACE OF ISSUE					
<input type="text"/>					

PLACE OF REGISTRATION WITH GOVERNMENT AUTHORITY

DATE OF REGISTRATION

<input type="text"/>	<input type="text"/>	<input type="text"/>
DATE	MONTH	YEAR

DECLARATION: I hereby declare that all the particulars stated in this application are true to the best of my knowledge and belief. I have read and understood all the provision of admission and agree to abide by them. In the event of suppression or distortion of any fact like educational qualification, nationality etc. made in the biodata form, I understand that my admission/degree is liable for cancellation. I further understand that my admission is purely provisional subject to the verification of the eligibility conditions.

CANDIDATE SIGNATURE WITH DATE

Original Document/s issued to the student (Columns 1,2, 3 to be filled by student)

	(1)	(2)	(3)	(4)
SL NO	NAME OF THE DOCUMENT	ISSUE DATE	SIGNATURE OF STUDENT	REMARKS (Official use only)
1				
2				
3				
4				
5				
6				