



**MAHATMA GANDHI UNIVERSITY**  
APPLICATION FOR REGISTRATION TO THE MGU-UGP (HONOURS) EXAMINATIONS  
FIRST SEMESTER EXAMINATION NOVEMBER 2024

Permanent Register Number:			
APAAR Number:	702025361995		
Name of Candidate:	JOEL JOSE		
Name of College:	St. George's College, Aruvithura		
Name of Programme:	BSc (Hons) Mathematics		
Date of Birth(DD/MM/YYYY):	14-05-2003	Gender:	Male
Address for communication with Phone number and Email:	Karackattu, Pinnakkanadu, Kottayam, KERALA, PIN Code:686508, 9072066490, joeljos432@gmail.com		
* Whether Eligible for Fee concession:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, State Category: SIGNATURE OF THE PRINCIPAL:	
*State whether there is Sufficient Attendance for each course:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If No, State whether applied for Condonation: <input type="checkbox"/> Yes <input type="checkbox"/> No SIGNATURE OF THE PRINCIPAL:	

**Details of Courses**

Course Name	Whether registering for exam				Remarks
DSC 1:MG1DSCMAT100 Ground roots of mathematics	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No **	
DSC 2:MG1DSCSTA100 Fundamentals of statistics and data visualisation	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No **	
DSC 3:MG1DSCPHY100 Foundations of physics	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No **	
MDC:MG1MDCPES100 Basic first aid and cpr	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No **	
AEC 1:MG1AECENG100 English for science part I	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No **	
AEC 2:MG1AECMAL100 സാഹിത്യമലിക് (സയൻസ്)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No **	

\*\* If No, specify in the Remarks column whether the course is an Audit Course or if the student is a Slow Learner

Signature of the Candidate:	Signature of the Head of the Department:
-----------------------------	--

\*Should be recommended by the Principal

Place:  
Date:

Signature of the Principal with office seal: