

Application No.

Register No.



# Sri Ganesh College of Arts & Science

(Co-Educational Institution - Affiliated to Periyar University)

Kamaraj Nagar Colony, AMMAPET, SALEM - 636 014,

Ph : 0427 - 2242999, 6532244

Roll No.

Affix your  
passport size  
photo here

## APPLICATION FORM FOR ADMISSION OF M.Phil DEGREE PROGRAMME

(FT/PT) 20 - 20

( TO BE FILLED IN CAPITAL LETTERS )

Course :

1. Name of the Applicant :

2. Age and Date of Birth :

3. Father's / Husband Name :

4. Mother's Name :

5. Nationality :

6. Community : 

|    |    |     |    |    |    |
|----|----|-----|----|----|----|
| OC | BC | MBC | DC | SC | ST |
|----|----|-----|----|----|----|

7. Sex : 

|      |        |
|------|--------|
| Male | Female |
|------|--------|

8. Address for communication : \_\_\_\_\_

Pin :

Cell 1 :

Cell 2 :

14. Father's / Husband Occupation :

15. Physically Handicapped : 

|          |
|----------|
| Yes / No |
|----------|

16. Annual Income :

17. Details of Educational Qualification :

| Sl No. | Course Studied | Reg. No. | Month & Year of Passing | % of Marks | Name of the College last studied | University | Regular (or) Distance |
|--------|----------------|----------|-------------------------|------------|----------------------------------|------------|-----------------------|
| 1      | SSLC           |          |                         |            |                                  |            |                       |
| 2      | H.S.C          |          |                         |            |                                  |            |                       |
| 3      | UG Degree      |          |                         |            |                                  |            |                       |
| 4      | PG Degree      |          |                         |            |                                  |            |                       |

13. Percentage Secured in PG :

|                                |  |
|--------------------------------|--|
| External & Internal Marks in % |  |
| External Marks only in %       |  |

14. Teaching Services, if any :

| Designation of the Teacher | Total Services in years, month and year | From | To | Name of the Institution |
|----------------------------|---|------|----|-------------------------|
|                            | 1. Polytechnic Teaching                 |      |    |                         |
|                            | 2. Higher Sec Teaching                  |      |    |                         |
|                            | 3. High. School Teaching                |      |    |                         |
|                            | 4. College Teaching                     |      |    |                         |
|                            | 5. Others                               |      |    |                         |

The above particulars given are correct to the best of my knowledge.

Station :

Date :

Signature of the Applicant

**For Office Use only**

|                |   |       |
|----------------|---|-------|
| Reference      | : | ..... |
|                | : | ..... |
| Fee Concession | : | ..... |
|                | : | ..... |

|                   |   |           |
|-------------------|---|-----------|
| Date of Admission | : | .....     |
| T.C. No.          | : | .....     |
| Issued Date       | : | .....     |
| H.O.D             |   | Principal |