

Application No.

Admission No.



FATIMA COLLEGE (Autonomous)

(College with Potential for Excellence)
(Re-accredited with "A" Grade by NAAC)

Mary Land, MADURAI - 625 018.

Stamp Size
Photo to be
Affixed

APPLICATION FORM FOR ADMISSION

POST GRADUATE COURSES (Aided)

SEMESTER SYSTEM

Indicate the course applied with a ✓ mark.

M.A. TAMIL	<input type="checkbox"/>	M.A. ECONOMICS	<input type="checkbox"/>	M.Sc. PHYSICS	<input type="checkbox"/>	M.Com.	<input type="checkbox"/>
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1) Name in Capital Letters (as in S.S.L.C.) :

2) Sex :

Female	<input type="checkbox"/>	Transgender	<input type="checkbox"/>
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3) Date of Birth as in S.S.L.C. :

Date		Month		Year	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

4) Community (Tick what is applicable) :

SC/ST/AC	<input type="checkbox"/>	MBC/ DNC	<input type="checkbox"/>	BC	<input type="checkbox"/>	OC	<input type="checkbox"/>
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5) Sub Caste :

6) Marital Status :

Single	<input type="checkbox"/>	Married	<input type="checkbox"/>
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7) Nationality 8) Passport No.
(Attach Copy)

9) a. Name of the Father :

b. Name of the Mother :

c. Name of the Guardian :
(State the Relationship)

10)a. Religion :

CHRISTIANITY	<input type="checkbox"/>	HINDUISM	<input type="checkbox"/>	ISLAM	<input type="checkbox"/>	OTHERS	<input type="checkbox"/>
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b. If Christian Tick what is applicable :

RC	<input type="checkbox"/>	RCD	<input type="checkbox"/>	CSI	<input type="checkbox"/>
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RC - Roman Catholic
RCD - Roman Catholic Dalit

11) Occupation of Parent / Guardian :

12) Annual Income of Parent / Guardian :

13) Place & District to which the Applicant belongs :

14) Permanent Address

Pincode : Phone :

15) Differently abled (If Yes attach details)

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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16) Distinction in SPORTS / NCC / NSS / (Attach Details)

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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17) Do you need accommodation in the Hostel ? :

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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18) College Last Studied :

19) Name of the University :

20) Name of the Qualifying Degree Examination :

Marks obtained :

	Subject Title	Month / Year of passing	% Marks
Part I			
Part II			
	Part III Major		
Ancillary I			
Ancillary II			
Extra Credit (if any)			
Percentage of marks obtained in Major			

Signature of the Candidate

DECLARATION BY THE APPLICANT & HER PARENT

I declare that all the particulars furnished above are true and correct and that I shall, if admitted abide by the rules and regulations of the College.

Signature of the Parent or Guardian

Signature of the Applicant

Place :

Date :

ATTESTATION BY PARISH PRIEST	
(Only for Catholic Students)	
This is to certify that the applicant	
belongs to my parish and that she is a Catholic.	
Seal with date	Signature