SRI GOKULNATHA MISSION

EDUCATIONAL INSITUTIONS

R.P. Pudur, Namakkal - 637 001. Tamil Nadu.
Ph : 04286 277884, Cell : 90802 81317

APPLICATION FOR ADMISSION

Application No. _____

1. Name in Block Letters

2. Name of the Parent / Guardian

3. Course of Study

4. Academic Year

Stamp Size Photo

5. Permanent Address

6. Phone Number :

7. Date of Birth :

8. Sex : Male ☐ Female ☐

9. Community : OC ☐ BC ☐ MBC ☐ SC ☐ ST ☐

10. Religion :

11. Educational Qualification :

12. Identification Marks :

13. T.C & Mark Sheet No. :

Declaration

I assure all the particulars above are correct to the best of my knowledge. If seek concellation in between the course of study, I assure to settle the full course fee of the course duration and I shall not offer to refund any amount which I remit for the purpose of my study by any force. If I am selected I shall obey the rules and regulations of this Institution.

Signature of the Parent / Guardian

Signature of the Student

Station :
Date :

FOR OFFICE USE ONLY

Selected Date :

Course :

PRINCIPAL