

Application No. 781



**MADURAI SIVAKASI NADARS
PIONEER MEENAKSHI WOMEN'S COLLEGE**

POOVANTHI - 630 611 Sivaganga Dist.

Cell : 98432-59191

email: officemsnpioneer@gmail.com

Web : www.msnpioneermeenakshicollege.org

(Self - Financing College)

Affix a Passport
Size Photograph

Application form for Admission to

M.Sc., MATHEMATICS / M.Sc., (CS & IT) / M.Com., (CA) / M.A., (Tamil) / M.A., (English)

SEMESTER SYSTEM

Read carefully the following before filling - in the Application

1. This application should be filled in only by the applicant. Do not leave any column blank.
2. Only block letters should be used to fill in the application, except for the signature.
3. Incomplete application would be summarily rejected.
4. Enclose photo copies of qualifying Degree Mark Statement, Conduct Certificates, T.C. and Community Certificate.
5. Enclose a passport size Photograph along with a self-addressed stamped envelope for Rs 5/-.

1. NAME OF THE APPLICANT : Miss.
(as given in the H.S.C. records)
2. AGE (Completed Years) and DATE OF BIRTH : Yrs. D M Y
(In Christian Era)
3. PLACE OF BIRTH :
4. MOTHER TONGUE :
5. NATIONALITY :
6. RELIGION AND CASTE :
7. COMMUNITY (Please Tick) : ☐ SC/ST ☐ MBC/DNC ☐ BC ☐ OC
8. ARE YOU PHYSICALLY CHALLENGED : ☐ Yes ☐ No
9. HAVE YOU REPRESENTED YOUR SCHOOL /
COLLEGE IN SPORTS, GAMES, QUIZ,
DEBATE ETC? (Please Specify) :
10. NAME AND ADDRESS OF FATHER/GUARDIAN
(all communications will be sent to this address) :
11. OCCUPATION AND ANNUAL INCOME OF
FATHER/GUARDIAN : Rs. /-p.a.
12. DETAILS REGARDING DEGREE EXAM.
 - a) College Studied :
 - b) Class and Percentage of Marks obtained in Part III
(Major and Ancillary subjects put together) :
 - c) Date of joining and Date of passing the course :
 - d) Register Number :
 - e) Number of attempts made :

g) Name of the University which
awarded the degree

	Subject (s)	Marks Obtained	Maximum Marks	Class	Percentage
Part I					
Part II					
Part III a) Major b) Ancillary I c) Ancillary II					

Office Seal :

Signature and Seal of Attesting Officer

13. IS HOSTEL ACCOMMODATION DESIRED : ☐ Yes ☐ No.

I declare that all the particulars furnished above are true and correct. I submit that I will abide by the rules and regulations of the college.

Place :

Date :

Signature of the Parent / Guardian

Signature of Applicant

FOR OFFICE USE ONLY

Signature of Staff who processed the Applicant

Signature of Head of the Department

Admitted in

PRINCIPAL