Application No.



MADURAI SIVAKASI NADARS PIONEER MEENAKSHI WOMEN'S COLLEGE

POOVANTHI - 630 611 Sivaganga Dist. Tel: 954574-265056, 98432-59191 email:msnpmwcpoo@yahoo.com (Self - Financing College)



Application form for Admission to

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

SEMESTER SYSTEM

				No.			
Re	ead carefully the following before filling - in the App	olicat	ion				
4.	This application should be filled in only by the applicant. Do not leave any column blank. Only block letters should be used to fill in the application, except for the signature. Incomplete application would be summarily rejected. Enclose photo copies of qualifying Degree Mark Statement, Conduct Certificates, T.C. and Community Certificate. Enclose a passport size Photograph along with a self-addressed stamped envelope for Rs.5/						
1.	NAME OF THE APPLICANT (as given in the H.S.C. records)	:	Miss.		,		
2.	AGE (Completed Years) and DATE OF BIRTH (In Christian Era)	: [Yrs.	D	М	Y	
3.	PLACE OF BIRTH						
4.	MOTHER TONGUE	:					
5.	NATIONALITY	:					
6.	RELIGION AND CASTE	:					
7.	COMMUNITY (Please Tick)		SC/ST	MBC/DNC	ВС	ОС	
8.	ARE YOU PHYSICALLY CHALLANGED	: [Yes	No 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 P (Major and Ancillary subjects put together) c) Date of joining and Date of passing the cours d) Register Number e) Number of attempts made		: I. : : :				

g) Name of the University which awarded the degree

e e	Subject (s)	Marks Obtained	Maximum Marks	Class	Percentage
Part I					
Part II					
Part III a) Major b) Ancillary I c) Ancillary II	9	10			

Office Seal :	Signature and Seal of Attesting Officer								
13. IS HOSTEL ACCOMMODATI	ON DESIRED : Yes	No.							
I declare that all the pa by the rules and regulations of the	rticulars furnished above are tr e college.	rue and correct.	I assure that I will abide						
Place :									
Date :	rdian	Signature of Applicant							
FOR OFFICE USE ONLY									
Signature of Staff who processed	the Applicantion								
Signature of Head of the Departm	nent								
Admitted in		*							

PRINCIPAL