St. GEORGE COLLEGE

-----OF MANAGEMENT & SCIENCE-----

(Affiliated to Bangalore University, Approved by AICTE & Recognized by the Government of Karnataka) OMBR Layout, Banaswadi, Bangalore-560043. Tel: 080-25450193/194 Fax: 080-25453522. Email: info@stgeorgecollege.org website: www.stgeorgecollege.org

APPLICATION FOR U.G. ADMISSION

For Office purpose only: College Admission No:	
1. Academic Year : 20 20 Course Appli	ed for: BBM []/ BCA []/
B.Com [] / B.Sc (Physics, Mathematics & Computer Science) []	/B.Sc(Mathematics, Statistics & Computer
Science) [] / B.Sc (Chemistry, Zoology & Microbiology) []/ B.Sc (Biochemistry, Genetics & Biotechnology)[
]/ $\mathbf{B.Sc}(Biotechnology, Microbiology & Biochemistry)$ [] / $\mathbf{BA}(Journal Base)$	rnalism, Psychology & Optional English) []
2. Name of the Applicant (IN BLOCK LETTERS) as men	tioned in 10 th /SSLC certificate
Telephone number: Landline: Mobile	:
3. Name of the Father (IN BLOCK LETTERS) as entered	
Telephone number: Landline: Mobile	
Occupation: Designation:	
Name of the Organization presently working:	
Annual Salary:	
4. Name of the Mother (IN BLOCK LETTERS) as entered	l in Transfer certificate
Telephone number: Landline: Mobile	:
Occupation: Designation:	
Name of the Organization presently working:	
Annual Salary:	
5. Date of Birth: DD/MM/YYYY Mother Tong Sex: Male [] / Female []	rue:
Religion:Specify: SC [] ST []	OBC [] GEN []
Attach the relevant Certificate as applicable	
6. Nationality:	
6. Nationality: If the applicant is not an Indian citizen, furnish the following	ng particulars:
Passport No:	Valid till : MM/YYYY

Visa Category: Student [] / Visiting [] / oth Visa No :				Valid	Valid till: MM/YYYY	
7. Name of the Entrance Exam taken: MAT [] / CMAT [] / PGCET [] / KMAT [] Score obtained: Percentile score: Valid Till: Attach the attested photocopy of the Test Score. 8. ACADEMIC RECORD Furnish details of certificates/degrees obtained						
Examination	Board/ University	Month/Y Passed	Year	Subjects	Grade / Class/ Percentage	
SSLC/Equivalent 10 th Standard School certificate Pre-University	•	Tubbed			Torontage	
Course/ Higher Secondary						
9. Medium of Instruction: 10. Hostel Facility required: Yes [] / No [] 11. Permanent Address Address for Correspondence:						
Telephone number:			Telephone number:			
I,		I,hereby declare that all the information provided in this form by me are complete and correct to the best of my knowledge. I undertake to abide by all the rules and regulations of the college, instructions of the authorities and be subject to their disciplinary action if needed.				
I assure the college of my full support and cooperation in all matters concerning academics, administration and general behavior of my ward. I shall accept and abide all the rules and regulations of the college and ensure compliance of the same by my ward. I further declare that in the event of discontinuation of studies by my		I agree to adhere to the rules and regulations, scheme of studies, examinations, the attendance requirement of the Bangalore University. I undertake to pay the stipulated fees and other payments for specific activities which form part of the academic requirement. I further declare that in the event of discontinuation of studies by me, I				
ward, I am liable to pay the entire course fee to the college. Neither I nor my ward shall be eligible for any refund of fees under any circumstances. Date: Place: Signature of the Parent/Guardian				am liable to pay the entire course fee to the college. Date:		