

KANNUR UNIVERISTY

**K.U. Campus, Mangattuparamba
Kannur-670567**

Application for Admission to the PGDCP Courses

1. Name of the Applicant :
(in block letters)
2. Male /Female :
3. Age and Date of Birth :
4. Nationality : Photo
5. Qualifying Examination/s
with Main and Subsidiary :
.....
.....
6. Permanent Address :
.....
..... PIN
Tel Off Res
7. Address to which
Communications are to be sent :
..... PIN
Tel Off Res
..... E-mail
.....
8. Annual Family Income :
9. a) Are you eligible for Community reservation for admission : Yes No (Please tick)
b) If yes, if you wish claim reservation please give the following information :
i) Caste / Community (Enclose certificates) :
ii) Category to which you Belong OBC/OBH/OEC/LC/SC/ST/ Others :
10. CURRICULUM VITAE (Attested copies of mark list should be appended)

Name of Examination	Name of Institution / University	Year of Passing	Marks (Aggregate for subjects excluding languages)	Total of maximum marks for the subjects as in column 4	Remarks
Degree					
Post-Graduate					
Any other (Specify)					

11. What motivated you to attend a counselling course ?
12. Undertaking **i)** I declare that the information given above is correct. **ii)** I declare that, if I am admitted as a student, I shall abide by all the rules and regulations of the university and the college, that are in force from time to time.
- Place : Signature of Applicant :
- Date : Signature of Parent / Guardian :

Office use only

Serial No.: Rank :

No. and Dated Chalan /DD :

Reserved or Unreserved : Admitted / Not Admitted :

Registrar