

Last Date for Submission

APPL. No.:

NAME

SANKAR POLYTECHNIC COLLEGE (AUTONOMOUS) SANKARNAGAR - 627 357.

APPLICATION FOR ADMISSION TO DIPLOMA COURSE (2020 - 2021)

Please read the instructions carefully before filling up the form.

1. Differently Abled (Please tick if Differently Abled)

2. APPLICATION FOR : (Please Tick)

I YEAR

DIRECT II YEAR

Affix Your
Latest
Photo here

3. NAME (IN BLOCK LETTERS) : _____

4. FATHER'S NAME : _____

5. DATE OF BIRTH : 6. SEX : Male / Female / Trans Gender

7. COMMUNITY : (Please Tick One)

FC MBC SCA
BC Muslim DNC ST
BC Other SCO

8. Caste : _____

9. Religion : _____

10. Month & Year of Passing : _____

11. Branch Preference : 1. _____

Application fee Rs.150/- to be paid by cash if submitted in person or by DD if the application is sent through post 2. _____
3. _____

DD No:

Mark Details

S.No.	SUBJECT	MARKS OBTAINED	MAX MARKS	MARKS IN WORDS
1.				
2.				
3.				
4.				
5.				
6.				
	TOTAL			

11. FULL ADDRESS

Name : _____

Name of Father / Guardian : _____ Mobile No.:

Door No. & Street : _____

Post Office : _____ Pin Code :

District : _____ Phone No. with STD Code : _____

DECLARATION BY APPLICANT

I, _____, Son / Daughter of Thiru _____, here by solemnly declare that the information and the statements furnished in the application are true, correct and complete. I further declare that should it be found otherwise, I am liable to forfeit my seat and be removed from the rolls of the Institutions at whatever stage of study I may be, besides making me liable for criminal prosecution. I agree to abide by the rules and regulations of the College, if admitted and I agree that once fees has been paid it will not be refunded under any circumstances.

Place :

Date :

Signature of the Candidate

DECLARATION BY PARENT

I, _____, Parent / Guardian of _____, here by solemnly declare that I am fully aware of the declaration made by the applicant, my son/daughter/ward and I declare and bind myself on the same terms contained in the above declaration and I agree that once fees has been paid it will not be refunded under any circumstances.

Place :

Date :

Signature of the Parent / Guardian

(Mother can sign if father is not available. A guardian can sign only if both parents are not alive)

ATTACH :

- 1. Xerox Copy of Mark Sheet (Internet Printout can be attached)**
- 2. Xerox Copy of Community Certificate (Not Required for FC)**

The filled application should be submitted to the Polytechnic Office on or before the last date specified.

FOR OFFICE USE ONLY

Application received on :

Counselling Date :

Branch Allotted : _____ Quota :

Admitted on :

Mark Sheet No :

Community Certificate No.

Fees Paid Chalan No :

Date :