Application No:			Admission No:	
Received on:			Class No:	
Ir Ir	OT AL	0V0UI0 0011E0E ED 471UIA	/00530	



ST. ALOYSIUS COLLEGE, EDATHUA-689573

Tel. 0477-2212264, 2215164, email:sacedathua@gmail.com www.aloysiuscollege.ac.in, www.aloysiuscollege.org Affiliated to Mahatma Gandhi University APPLICATION FOR ADMISSION TO B. A./ B.Sc./ B. Com

PHOTO

	7	(Read th	e Prospec	tus carefull	y before filling	1)		
1.	0 " "	MAIN / CORE SUBJECT		СТ	SUI	BSIDIARY/ELEC	TIVE/CO	MPL.
		1 st Choice		1			2	
	Course applied for:	2 nd Choice		1			2	
		3 rd Choice		1			2	
		Additional langu	age selec	ted				
2.	Name of Applicant (as in SSLC Book or in Other qualifiing certificate)	(In English - Block letters)(in Vernacular)						
3.	Names indicated by intials, if any							
4.	MG University CAP online Application NUmber :							
5.	Sex (Tick)	Male			Female	Trar	nsgender	
6.	Tick the relevent item	SC S	T	OEC	OBC	Catholic	None	e of these
7.	Date of Birth (as in SSLC Book)							
8.	Blood group							
9.	Taluk, Dt. & P. O.	Taluk		Distric	ot	Post (Office	
10.	Name of Parent / Guardian							
11.	Relationship with guardian							
12.	Occupation of the guardian							
13.	Phone Number(guardian)	Mob				and No		
14.	Permanent address of the applicant							@
15.	Permanent address of the parent / guardian with office address if any			PIN		Phone email		@
16	Adhar card number							
17.	Family Income	Rs		/ Per year				
18	Ration card Number					Whether A	PL / BPL	
19	Residence	Home	Hostel		Lodge	with Guard	ian / Relativ	ve
20	Religion with denomination							

17. If a member of any backward fee concession from Harijan subcaste: (Attach copies of	Welfare D	ept., State cas								
18.Institution studied Name of Institution		Place	Reg. No	. Uni	versity / State	% of Marks	Conduct			
S.S.L.C. or equivalent										
+2 or equivalent										
Any other (Specify)										
19. Year in which and the college through which the		Year:								
applicant was registered as a n			College							
Have you submitted Mig (For Students from University			Yes / No							
21. Any claim for special cor										
(Handicapped / Blind / D	eaf / Spo	orts)								
22. STATEMENT OF MARKS	(Self atte	sted copy of	mark list to	be attached	1)					
23. Name of qualifying exa	am:				.Year	Board	ł			
Subject No.		No. of ch	ances	Max. m	arks	Marks score	ed F	Reg. No.		
Part I : English										
Part II: Language										
Part III :1										
2										
3										
4										
Total:										
23. Weightage marks (tick if copy attached)	x-service	e In-se	rvice	N.S.S.		N.C.C	Any other			
		DECLAR	ATION OF	THE APP	LICANT	• •				
I declare that the entri college and pay the fees in			true and	correct. I	agree to	abide by the	rules and r	egulations of		
Place :					N	ame				
Date :				Signature						
				Name	and Sig	gnature of guard	lian			
		FOR OF	FICE USE							
Total merit marks for	Part I, II	, III								
Marks for Part III Main										
Weightage marks										
Deduction marks										
	TOT	TAL								
THE APPLICANT IS ADMITTE	D TO B	. Com. / B.	A			/ B. Sc				
Sub	: 1				.2			Language		
Date		Head of	f the Depa	rtment		P	PRINCIPAL			

Reg. No.	
Admission No	ST. AL
	AFFILIATED TO
Class No	



Space For

	lass No.		GANDHI UNIVERSITY, KOTTAYAM UA-689 573	For Photo
		APPLICATION FOR ADMISSION	TO M. A. / M. Sc / M. Com Course	
		ı	is before filling in this application. This applica	tion should reach the
1.	qualifying c	e applicant (as in the SSLC Book) or other ertificate as the case may be Women should add W after Name		
2.	Name indic	ated by initials, if any		
3.	MG Univers	sity CAP online Application Number		
4.		h as in the S. S. L. C Book and age I years and months)		
5.	Name of Pa	arent or Guardian		
6.	Relationshi	p of the applicant to the Guardian		
7.	Occupation	of the Guardian		
8.	Annual Inc	ome		
9.	Ration Care	d Address		
10.	Permanent (with Phone	address of the Guardian e No.)		
11.	Adhar card	number		
12.	Present Ad (with Phone	dress of the Guardian e No.)		
13.	Blood group			
14.	mention the	h denomination and caste (if a catholic, diocese) mention the parish if the elongs to Changanacherry Arch Diocese		
15.	for fee con-	er of any backward community eligible cession from Harijan Welfare department, e and Subcaste)		
16.		the Applicant with Taluk, Post Office and ephone No. (Land & Mobile)		
17.	Name of th Reg. No.	e Institution attended for SSLC with		
18.		e Institution last attended for PDC/Plus ears of study with Reg. No.		
	or any oth b) Reg. Not c) Name of any atte so, name	ne college last attended for BSc/B. Comper course with year of study. Rear of passing the qualifing Examination the college and course and course if anded by the applicant outside Kerala. If the of the University		
20.		th and the college through which the as registered as a matriculate of the		

21. Are you eligible fo Specify (Attach co							
22 Any claim for spection may be menti	ca-						
23. Residence (with prelative/ Hostel)	arent / in approv	ved lodge/ wit	:h				
nition of the q	ualifying examina sible if the Univers	tion immediate sity refuses reg	ly after the a istration and	admission to eligibility.	this college,	failing in wh	hould apply for recog hich the college office will mission.
		DECLARAT	ION OF TH	HE APPLIC	ANT		
,		•	•	•	not to take	part in strik	es and other agitation
against the authorities of	of the College ar	nd the Univers	sity, If admit	ted.			
				•	•		
Date							
		STAT	EMENT OI	F MARKS			
		-	ttach True C	-			
B. A. / B. Sc. / B.Com Passed	Reg. No.	Year of passing	Marks awarded	Maximum Marks	CCPA/ CGPA	Grade	University
Common course I English							
Common course II Language							
Core course							
Complimentry Course I							
Complimentry Course II							
Open Course							
Total Marks							
Final CCPA/CGPA							
		FOR THE U	SE OF CO	LLEGE OF	FICE		
		al Merit marks					
		ightageduction					
		rit Total					
	THE APPLICANT					n / M.Sc	
	HOD		А	dmitted / N	ot Admitted	k	

Date.....PRINCIPAL



ST. ALOYSIUS COLLEGE

APPLICATION FOR ADMISSION UNDER THE MANAGEMENT QUOTA

M.Q. No MG University online Application No					
	Р	'ART I			
Name of the Candidate	:				
			Male/Fem	iale/Transgender	
Age and Date of Birth	:				
Home Address	:		•••••		
			• • • • • • • • • • • • • • • • • • • •		
	•••••		•••••		
Religion	:	Caste/Co	mmunity		
If Catholic	: Parish		Diocese	••••	
Occupation and annual Income of Guardian :					
Details of qualifying exar					
Qualifying examination passe	ed :		Year of passing.		
Name of University/ Board	:		•••••		
Name of College/School atten	ded				
for qualifying examination:.	• • • • • • • • • • • • • • • • • • • •		•••••		
SUBJEC	T	Max. Marks	Marks scored	No. of chances	
Part I : English					
Part II : Language					
Part III :1					
2					
3					
4					
	TOTAL:				
(N. B. Self attested copy of mark list	to be attached)				
Programme for which admi	ssion is sought	: 1st Choice	• • • • • • • • • • • • • • • • • • • •		
		2nd Choice	•••••		
viv. 1. 1 1 1 1	41			•••••	
We do hereby declare that	the particulars g	given above are cor	rect		
Place					
Date	Signature	e of the Parent	Signa	ture of the Applic	

		PART II		
1.(a) Name & Address of the Spons	sor :			
(b) Relationship to the candidate				
	DE	CLARATION	I	
I will, if admitted, abide by all	the rules of	the college	Signatu	re of the applicant
We hereby hold ourselves wholl				
the College authorities aganist him,	/her.			
Place	Name & Signa	ature of Guar	dian Name	& Signature of Sponsor
Date	(Phone No)) (Pho	ne No)
		PART III		
1. Class passed in Sunday School Ca 2. Participation in Religious Organ	(If the a	pplicant is a		attendance
Organisation	Mem From	bership To	No. of camps attended	Post held
Cherupushpa Mission League				
Yuva Deepthi				
3. No. of years served as Altar Boy	: .			
4. No.of years served as Catechism	Teacher :			
5. Details of services rendered by p	arents in th	e Parish/For	ane/ Diocesean lev	el.
6. Details of Merit Certificates				
7. Remarks of the Parish Priest rega	arding the a	pplicant or l	nis/her parents	

Seal

Name & Signature of Parish Priest

(Phone No.....)

Place.....

Date.....