

ST. LOUIS COLLEGE OF THE DEAF

CANAL BANK ROAD, GANDHI NAGAR, ADYAR, CHENNAI – 20

APPLICATION NO:

- Please READ THE PROSPECTUS CAREFULLY before filling up the application
- Please tick whichever necessary

AFFIX
PASSPORT
SIZE
PHOTOGRPH

1	NAME OF THE APPLICANT										
2	COURSE APPLIED FOR					M.Com					
3	DATE OF BIRTH			DD	MM	YYYY	4. GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender			5. BLOOD GROUPS	
6	COMMUNITY (As in T.C)					<input type="checkbox"/> OC <input type="checkbox"/> BC <input type="checkbox"/> MBC <input type="checkbox"/> SC/ST Please Mention your CasteS					
7	RELIGION					<input type="checkbox"/> CHRISTIAN <input type="checkbox"/> HINDU <input type="checkbox"/> MUSLIM <input type="checkbox"/> OTHERS					
8	NATIONALITY					<input type="checkbox"/> Indian <input type="checkbox"/> NRI <input type="checkbox"/> Foreigner MOTHER TONGUE					
	a) INDIAN		STATE	DISTRICT	VILLAGE	TOWN					
	b) NRI/FOREIGNER		COUNTRY	VISA.NO.	PASSPORT NO.	PASSPORT VALIDITY					
9	EXTRA CURRICULAR ACTIVITIES					<input type="checkbox"/> NSS <input type="checkbox"/> NCC <input type="checkbox"/> SPORTS <input type="checkbox"/> OTHERS					
10	PARENT'S DETAILS			NAME	EDUCATION	OCCUPATION	ANNUAL INCOME				
	FATHER										
	MOTHER										
11	NAME OF THE COLLEGE, PLACE LAST ATTENDED					T.C. NO. :					
						DATE :					
	COURSE STUDIED					<input type="checkbox"/> URBAN <input type="checkbox"/> RURAL					
12	PART I		PART II		PART III		TOTAL MARKS OBTAINED/ MAXIMUM MARKS	TOTAL MARKS OBTAINED/ MAXIMUM MARKS (WITHOUT LANGUAGES)			
			ENGLISH		MAIN	ALLIED					
	MARKS										
13	HEARING LOSS PERCENTAGE		LEFT SIDE PERCENTAGE (%)			RIGHT SIDE PERCENTAGE (%)					
14	ADDRESS FOR COMMUNICATION										
	PRESENT ADDRESS					PERMANENT ADDRESS					
	PIN					PIN					
	MOBILE NO										
	PARENT [FATHER/MOTHER]:					STUDENT:					

- USE CAPITAL LETTERS ONLY

I.....understand that association with any unlawful organisation is forbidden. If selected for admission, I promise to abide by the rules and regulations of the College. All the particulars stated in this application are true to the best of my knowledge and belief.

Date:.....

Signature of the Applicant

UNDERTAKING BY PARENT / GUARDIAN

In the event of the above applicant, my son / daughter / ward being admitted to the College, I undertake to pay regularly all his/her dues to the College till the completion of his/her course of studies. I also undertake to be responsible for his / her conduct, progress in studies and attendance.

Date:

Signature of the Parent

Certificates to be produced at the time of Interview

- | | | |
|---------------------------|--------------------------|---------------------------------|
| 1. B.COM – Mark Statement | 2. Transfer Certificate | 3. National ID with Audiogram |
| 4. Conduct Certificate | 5. Community Certificate | 6. Passport Size Photos – 3No’s |

FOR OFFICE USE ONLY

Admission No. :..... **Date of Admission** :.....

Course & Year :.....

Date on which fees paid:..... **Receipt No.** :.....

Certificate Verification by:

1.

2.