



ST. GEORGE'S ARTS & SCIENCE COLLEGE

Govt. Recognised Minority Institution
Estd.2020 - Co-Education
Affiliated to the University of Madras
APPLICATION FORM - UG ADMISSION
(Write in **CAPITAL** Letters)

Please affix
your recent
Passport size photo
Application Form

No: Academic Year : 2 0 - 2 0

1. ENROLMENT NUMBER: (For Office Use Only)

2. COURSE APPLIED FOR

(Select one)

B.Com.	(General)	
B.B.A.	(Business Administration)	
B.C.A.	(Computer Applications)	
B.Sc.	(Computer Science)	
B.Sc.	(Criminology and Criminal Justice System)	

Language Opted for Part I (✓): TAMIL FRENCH

3. PERSONAL DETAILS

• Full Name of the Applicant as in the Mark Statement of XII Standard:

• Date of Birth : Age:

• Gender (Tick ✓): M F TG Nationality:

• Aadhaar Number :

• Blood Group : Mother Tongue :

• Religion: (Tick ✓): Hindu Christian Muslim Others

• Community: (Tick ✓):

OC BC OBC MBC DNC SC ST Others

• Caste: Differently abled (Tick ✓): Y N

• First Graduation:(Tick ✓): Y N

4. CONTACT DETAILS

• Mobile Number:

• WhatsApp Number:

• Email ID:

• Permanent Address:

- Area:
- City:
- State: Pin Code:

5. EDUCATIONAL QUALIFICATION

Enclose Original and Copies of Mark Sheet

Class	School Last Studied
X	
XI	
XII	

- Board of Education

Class X: (✓): HSC CBSE ICSE FOREIGN OTHERS

Class XI: (✓): HSC CBSE ICSE FOREIGN OTHERS

Class XII: (✓): HSC CBSE ICSE FOREIGN OTHERS

Class XII EMIS Number: _____

Class XII Register Number: _____

Class XII Month and Year of Passing: _____

Group Studied: _____

SUBJECT STUDIED		MAX MARK			MARK OBTAINED		
ENGLISH							
LANGUAGE							
SUBJECT 1							
SUBJECT 2							
SUBJECT 3							
SUBJECT 4							
SUBJECT 5							
TOTAL MARKS							

TOTAL MARKS OBTAINED (WITHOUT LANGUAGE)

TOTAL PERCENTAGE OBTAINED (WITHOUT LANGUAGE)

6. PARENT / GUARDIAN DETAILS

- Father's Name : _____
- Occupation : _____
- Education : _____
- Email : _____
- Mobile Number : _____
- Annual Income : _____

- Mother's Name : _____
- Occupation : _____
- Education : _____
- Email : _____
- Mobile Number : _____
- Annual Income : _____

7. EXTRACURRICULAR ACTIVITIES

1. _____
2. _____
3. _____

8. SPORTS / CULTURAL ACTIVITIES

1. _____
2. _____
3. _____

9. MEDICAL HISTORY

<p>Do you have any medical conditions, allergies, or chronic illnesses (e.g., asthma, diabetes) that our college medical services or campus safety team should be aware of in an emergency? Please mention the specific medical condition and if you are undergoing any treatment. Please provide supporting documents.</p>
<p>Are you currently taking any regular medications or do you have any severe allergies (including food, insect, or medication) that may require intervention during your time on campus? Please provide prescription.</p>

10. DOCUMENTS SUBMITTED

- Mark Sheets -10th, 11th & 12th
- Transfer Certificate
- Community Certificate
- Conduct Certificate
- Passport Size Photos
- Income Certificate
- First Graduate Certificate
- Aadhaar Card Copy
- Ration Card
- Parents Aadhaar Card

DECLARATION BY THE STUDENT

I hereby declare that,

1. I will not cause any damage or deface to any property of the College such as Furniture, Sports Equipment, Books, Chairs, & Walls etc
2. I will maintain a minimum of 75% of attendance as per the rules of the college. If I absent myself from classes for more than 3 days, I shall submit a valid letter signed by my Parent / Guardian. I understand that my parents will be contacted if I am absent for more than 5 days.
3. I am aware that if I do not maintain 75% of attendance in all subjects, I will not be allowed to appear for the University Exams.
4. I shall adhere to the dress code of the college.
5. I shall not partake in any strike or political activity and agree that all disputes are subject to jurisdiction of the court of Chennai only.
6. If I am undergoing medical treatment, and avail leave, I will provide a medical fitness certificate along with prescription on the day I join back college. I understand that I will be given medical leave only if I provide the above documents.

I.....hereby declare that the particulars given in this application form are true and correct to the best of my knowledge and belief. If it is found at any stage that there is suppression, Incorrect or false statement of data, I am aware that is may lead to my dismissal from the college.

Place:

Signature of the Student

Date:

DECLARATION BY THE PARENT

1. If admitted, we agree to abide by the rules and regulations, discipline and decisions now in force and those that will be made from time to time by the College.
2. I accept that the fee once paid to the College is not refundable in case my son / daughter does not join the college / discontinue his / her studies or expelled from the College.
3. I have read the rules and regulations of the college and agree to the conditions.

Place:

Signature of the Parent /Guardian

Date :

FOR OFFICE USE ONLY

Application Number:

Verified By:

Admission Status:

Approved Rejected Pending