



CSI BISHOP APPASAMY COLLEGE OF ARTS & SCIENCE

Application No.

(CO-EDUCATION)

CHURCH OF SOUTH INDIA COIMBATORE DIOCESE

129, Race Course, Coimbatore - 641 018.

Application for Under Graduate Course

Email : csibacas@gmail.com, web : csibacas.org

Phone : 0422 - 2222251, 2221840

(To be filled in and returned)

Passport size
Photograph duly
signed across by
the candidate

1. COURSE APPLIED FOR

2. Part I Language Tamil / Hindi / French

3. FULL NAME IN ENGLISH
(As per S.S.L.C. record)

4. Father's Name

Father's Occupation

5. Nationality

Gender : Male / Female

6. Date of birth

Date

Month

Year

Age

7. Native Place

District

State

8. (a) Community - (FC / BC / MBC / SC / ST / Others)

(b) Name of Caste as in the Community Certificate

(c) Religion

if Christian mention Denomination. CSI / RC / OTHERS

9. Aadhar Number of student

10. Email :

11. Mobile Number :

12. Medium of Instruction : English / Tamil

NAME OF THE BOARD : CBSE / STATE / ICSE

Subject	Marks Obtained Max : 200	Month and year of passing	No. of Attempts	Reg. No.
1 - Tamil				
2 - English				
3 -				
4 -				
5 -				
6 -				
Total				

CLASS OBTAINED : I / II / III

13. Details of the Institution last attended

Name of the School	Place	District	Std	Period of Study
			HSC	

14. Mother Tongue

Blood Group

15. Are you differently abled person YES NO If yes, details _____

16. Extra Curricular Activities _____

- a) _____
- b) _____
- c) _____
- d) _____
- e) _____

17. Details of Parents / Guardian (if father is not alive)

Name	Occupation	Annual Income	Place of Work
Father :		₹.	
Mother :		₹.	
Guardian :		₹.	

Present Address

Permanent Address

Photo of Parent / Guardian	_____	_____
	_____	_____
	_____	_____
	City _____	City _____
	Pin code _____	Pin code _____
	Mobile _____	Mobile _____
	E mail _____	E mail _____

Note : Please ensure that following attested photocopies are enclosed

- (i) 10th Mark Sheet
- (ii) 12th Mark Sheet
- (iii) Transfer Certificate
- (iv) Aadhaar card
- (v) Community Certificate

DECLARATION ON THE APPLICANT

I hereby declare that the above information given by me is correct to the best of my knowledge and belief. If found incorrect at any time. I accept any action taken by the Authorities of the college. I promise to abide by the rules of the college.

Signature of the Applicant

DECLARATION OF PARENT / GUARDIAN

I hereby declare that all the particulars given by my daughter / son in the application are correct to the best of my knowledge and belief. If found incorrect at any time, I accept any action taken by the Authorities of the college. I promise to abide by the rules of the college

I shall be responsible for the payment of fees and other charges connected with the curricular and extra curricular activities of this college. I shall be responsible for her / his good conduct and behavior during the period of study.

Station :

Date :

Signature of the Parent / Guardian

FOR OFFICE USE ONLY

Admit in

Admission No

Date :

PRINCIPAL