

FORM NO.



Shantha Group of Institutions

Chikkaballapura - 562 104

ADMISSION FORM

**“DEVELOP A PASSION FOR LEARNING, IF YOU DO,
YOU WILL NEVER CEASE TO GROW”.**

ANTHONY J.D'ANGELO



principal.shanthacon@gmail.com



Peresandra Cross, NH-7, Chikkaballapura Taluk & Dist.
Karnataka - 562 104.



PHOTOGRAPH

Please paste a recent passport sized photograph to this box.

This application form to be filled by the applicant applying for admission to any regular program of this Institution. In his/her clear and legible writing in BLOCK LETTERS, and in BLUE / BLACK INK ONLY.

1. COURSE APPLIED FOR : _____

2. NAME OF THE CANDIDATE (as in High school or equivalent certificate) : _____

3. FATHER NAME : _____ MOTHER NAME : _____

4. GENDER : MALE FEMALE

5. CATEGORY : GEN ST SC OBC OTHERS

6. NATIONALITY : Indian Others

If any other, please specify the Nationality _____ and give the following details

Passport No. _____ Issued Date _____ (DD/MM/YY)

Valid Till _____ (DD/MM/YY) Issuing Country _____ VISA Type : _____

Exam Details : TOEFL IELTS SAT Roll No. _____ Rank/Score: _____

7. ADMISSION CATEGORY : Management Govt. Foreign/International

8. DATE OF BIRTH : _____ (DD/MM/YY) 9. BLOOD GROUP : _____

10. CORRESPONDANCE ADDRESS : _____

11. CITY: _____ STATE: _____ PIN CODE: _____ COUNTRY: _____

12. PERMANENT ADDRESS : _____

13. CITY: _____ STATE: _____ PIN CODE: _____ COUNTRY: _____

14. TEL NO : _____ MOBILE NO : _____

15. E-MAIL ID : _____

16. HOSTEL ACCOMMODATION : YES NO

17. TRANSPORT REQUIRED : YES NO

18. PRE-QUALIFYING TEST.

(For School of management) KEA CET NEET

If others,

please specify _____



19. EDUCATIONAL QUALIFICATIONS :

It is mandatory to attach certified copies of educational qualification(as applicable) from Class X onwards till last completed examination.

Name of the Examination	Name of the School/College	Board / University	Subjects	Year of Passing	Overall Percentage
High School					
Intermediate					
Graduation					
Others					

20. CHECK LIST OF DOCUMENTS TO BE ATTACHED

- * Class 10th Mark sheet
- * Class 10th Passing Certificate
- * Class 12th Mark sheet
- * Class 12th Passing Certificate
- * Class 12th Migration Certificate
- * Transfer Certificate
- * Character Certificate
- * Cast Certificate
- * Sports Documents _____
(if applying for Sports Quota Scholarship)
- * Others _____

21. DO YOU SUFFER FROM ANY CHRONIC AILMENT Yes No

If yes, give details : _____

Emergency Medicine taken : _____

22. HAVE YOU EVER BEEN SUSPENDED, DISMISSED OR PUT ON ACADEMIC PROBATION AT ANY SCHOOL OR COLLEGE?

Yes No if yes, give details & why? : _____

23. DETAILS OF PAYMENT FOR APPLICATION FORM :

By cash : Cash Receipt No. _____ By Demand Draft: Receipt No. _____

DD No. _____ Bank _____ Date _____



24. FAMILY INFORMATION:

Family Details	Full Name	Education Level	Occupation	Annual Income(Rs)	Contact Details Ph. No/Mob. No	E-mail Address
Father						
Mother						
Guardian						

25. DECLARATION :

I _____ hereby declare that the information given in the application form is complete and true to the best of my knowledge and belief. I undertake to abide by all the rules and regulations of SHANTHA GROUP OF INSTITUTIONS. I understand and agree that misrepresentation, concealment of facts, any contravention or breach of Rules and Regulations will justify denial / cancellation of admission/ expulsion and/or initiation of proceeding under appropriate law. In have read and do hereby agree to the terms and conditions for admissions at SGOI.

Place : _____

Date : _____

Signature of the Candidate : _____

Parent/Guardian's Endorsement

I agree with the above and take full responsibility of my son / daughter / to pay all his / her fee, till completion of the Course.

Parent / Guardian's Name: _____

Place : _____

Date : _____

Signature : _____