

Application  
number

Name of applicant



# RAJAGIRI DAWOOD BATCHA COLLEGE OF ARTS AND SCIENCE

PAPANASAM-614 205, THANJAVUR DISTRICT PH: 04374 - 222123, 291113

(Co-Educational)

(Govt. approval G.O. Ms No.419 Dated 22.09.99)

Bharathidasan University approval No. 20913/D1/99 Dated 29.12.1999)



(For Office use)

## APPLICATION FORM FOR ADMISSION TO POST GRADUATE COURSE

202 - 202

M.Sc., M.Com., & M.B.A.,

Affix  
Your passport  
size photograph  
here

Principal

Course applied for		Qualifying degree month & year of passing	
1. Name (In block letters)			
2. Age and date of birth		3. Name of the community	SC ST MBC DNC BC OC
4. Religion		5. Caste	
6. Nationality		7. Sex	M F
8. Native place		8. Urban / Rural	
9. Name of Parent/ Guardian (State relationship)			
9. a) Father's / Guardian's educational qualification & occupation			
9. b) Annual income			
10. Permanent address with telephone number	Present address with telephone number		
Pin:	Ph:	Pin:	Ph:
11. If Physically handicapped, specify	Yes <input type="checkbox"/> No <input type="checkbox"/>	12. Are you son/daughter of ex-serviceman of Tamilnadu origin?	
13. Are you of Tamil origin from Andaman and Nicobar Island?	Yes <input type="checkbox"/> No <input type="checkbox"/>	14. Distinction in Sports / NCC / NSS	
15. Name & Location (District) of College last studied			

