

## **ANNAI THERESA COLLEGE**

Registered under Govt.Act (AICETR)
App.by Vinayaka Mission's University.Govt of India.

## **APPLICATION**

l. Name (In Capital Letters)	:	
2. Sex	:	Male Female
3. Date of Birth	:	Date Month Year
I. Contact Address	:	
		Pin:
6. Contact No.Cell /Phone	:	
6. Blood Group	:	
. Community	:	OC BC MBC SC/ST
3. Name of Parent / Guardian	:	
. Educational Qualification	:	***************************************
0. Course details	:	***************************************

## **DECLARATION**

- 1. The fees once paid at any circumstances not refundable.
- 2. The information furnished here in are true and correct to the best of my knowledge.

Place: Signature of Applicant

Parent / Guardian