

MARIA ARTS AND SCIENCE COLLEGE FOR WOMEN



(Affiliated to Manonmaniam Sundaranar University)

TIRUCHENDUR ROAD, VALLIOOR

TIRUNELVELI DIST. 627 117, TAMILNADU

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Mobile : 94878 44022, 94867 00765

APPLICATION FORM

Academic Year 2024 - 20 25

Passport - size
to Be
Affixed
and
signature of the
applicant

Application No:

Date:

please put a tick in the box provided for the choice of course

<input type="checkbox"/> BA – TAMIL	<input type="checkbox"/> B.Sc. – MATHEMATICS
<input type="checkbox"/> BA – ENGLISH	<input type="checkbox"/> B.Sc. – COMPUTER SCIENCE
<input type="checkbox"/> BA - HISTORY	<input type="checkbox"/> B.Sc. – DATA SCIENCE
<input type="checkbox"/> B.Com - ENGLISH	<input type="checkbox"/> B.Sc - Artificial Intelligence
<input type="checkbox"/> B.Com - TAMIL	<input type="checkbox"/> B.Sc - Fashion Tecnology
<input type="checkbox"/> BBA	<input type="checkbox"/> B.Sc - Nutrition & Dietetics

1. NAME : (BLOCK LETTERS)

In English :

In Tamil :

2.DATE OF BIRTH:

AGE :

3.RELIGION: Hindu / Christian / Muslim/ Others

NATIONALITY : Indian / Others

4.COMMUNITY: OC/BC/BCM/MBC/DNC/SC/ ST/ Others

CASTE :

5.DAUGHTER OF EX-SERVICE MAN: Yes / No

BLOOD GROUP:

If yes give ID No (Attached Proof with Xerox Copy)

6. Are you Sports Person: Yes / No

If yes please tick / National / State / Zone / District (Attached Proof with Xerox Copy)

7. PHYSICALLY CHALLENGED: Yes / No

AADHAR NO:

If yes (Attached Proof with Xerox Copy)

8. FATHER'S NAME:

9. OCCUPATION :

ANNUAL INCOME:

10. MOTHER'S NAME:

11. OCCUPATION :

ANNUAL INCOME:

12. COMMUNICATION ADDRESS:

Door No.: _____	Street Name: _____
Village : _____	Post : _____
Taluk : _____	District : _____
State : _____	Pin Code : _____

13. Mobile No of Parent / Guardian:

Mobile No. of Student:

14. Student E.Mail ID:

15. Have you studied VI to XII in Tamil Medium :

QUALIFYING EXAMINATION DETAILS:

School Name: Place:

12th Register No: Medium:

Subject	Marks Obtained (XII)	Month / Year of Passing	Marks Obtained (XI)	Month / Year of Passing
Tamil				
English				
Total				

Subject	Marks Obtained (X)	Month / Year of Passing
Tamil		
English		
Maths		
Science		
Social science		
Total		

16. Hostel: Transport: By Own:

17. If transport Needed, mention the boarding point:

18. Student ABC ID :

Place :

Date:

Signature of the Applicant

Signature of the Parent / Guardian

OFFICE USE ONLY

Office Staff

Signature of the Principal