Sri Gokulnatha Mission®

EDUCATIONAL INSTITUTION

R.P Pudur, Namakkal-637001, Ph: 04286-277884, 94459 33320

SRI GOKULNATHA MISSION
Educational Institution

21 Yrs SERVICE

APPLICATION FOR ADMISSION

Application No. ☐

1. Name in Block Letters

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Passport Size Photo

2. Course of Study

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3. Name of the Parent / Guardian

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4. Peramanent Address

_____

_____

_____

5. Phone Number : _____

6. Date of Birth : ☐☐ ☐☐ ☐☐☐☐

7. Sex : Male ☐ Female ☐

8. Community : OC ☐ BC ☐ MBC ☐ SC ☐ ST ☐

9. Religion : _____

10. Educational Qualification : _____

11. Identification Marks : _____

12. T.C & Mark Sheet No. : _____

Declaration

I assure all the particulars above are correct to the best of my knowledge. If seek concellation in between the course of study, I assure to settle the full course fee of the course duration and I shall not offer to refund any amount which I remit for the purpose of my study by any force. If I am selected I shall obey the rules and regulations of this Institution.

Signature of the Parent / Guardian

Station :

Date :

Signature of the student

FOR OFFICE USE ONLY

Selected Date :

Course :

Principal