

Alternate contact Phone (Mobile and Landline with STD Code)
with the name of the person and relationship with the student: _____

10 (a). Father's Name: _____
Occupation (specify) _____ Annual Income _____
Office Address with Phone No. (if any) _____

10 (b). Mother's Name: _____
Occupation (specify) _____ Annual Income _____
Office Address with Phone No. (if any) _____

10 (c). Do you have Brothers or Sisters? If yes, give their names: _____

10 (d). Husband's Name (In case of married female candidate): _____
Occupation (specify) _____ Annual Income _____
Office Address (if any) _____
Contact Number (Mobile and Landline with STD Code): _____
E-Mail ID _____

11. Name and address of Local Guardian (if any): _____

Post Office: _____
District: _____ State: _____ Pin Code: _____
Phone No (with STD Code) _____ Mobile No. _____
E-Mail ID _____ Relationship with student: _____

12. Name of the College / Institution last studied for the qualifying examination:

- a) Name of the College / Institution: _____
- b) Address with Pincode: _____
- c) Name of the Degree: _____
- d) Year wise or Semester wise system: _____
- e) Month and Year of passing: _____
- f) University: _____
- g) Subjects – Main: _____ Ancillary: _____

13. What is the present stage of your study: Course completed / Appeared in final examination / Result awaited / Qualified
(*strike out whichever is not applicable*)

14. Marks obtained in the qualifying examination:

(Enclose self - attested photocopies of ALL the Marklists / Grade sheets of the Degree exams)

[If the Degree was of annual (year) pattern, use only the first three columns to enter marks]

Semester / Year	I	II	III	IV	V	VI	Total
Marks Obtained							
Maximum Marks							
% of Marks / Grade Point							

15. Subjects for which more than one attempt was made: _____

16. Month and Year of passing: _____

17. Marks obtained for 10th and 12th standard:

(Enclose self - attested photocopies of 10th and 12th mark sheets)

Class	Marks Obtained	Maximum Marks	% of Marks	No. of Attempts
10 th				
12 th				

18. Major Extra Curricular Activities

No.	Activity	Year		Honours Received (if any)	Remarks
		From	To		

19. Reason for choosing the AMRITA school for your studies:

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20. How did you come to know of Amrita School of Arts and Sciences, Kochi Campus?

- The Hindu Indian Express Matrubhumi Malayala Manorama
Janmabhumi Kerala Kaumudi Amrita Website Alumni TV Channel
M.A.MATH Matruvani Other Institutions College / Institution last studied
Face book Others (Specify) _____

DECLARATION BY THE APPLICANT

I _____ S/o. / D/o. of _____

hereby declare that the particulars given by me in this Application Form are true. I shall produce the original certificates at the time of admission. I confirm having read and understood the "Instructions to Candidates" and "FAQ" before filling this Application Form.

Place:

(Signature of the applicant)

Date:

Name: _____

DECLARATION BY PARENT / GUARDIAN

I, _____ undertake the responsibility of my daughter/ward _____ who is seeking admission in the Amrita School of Arts and Sciences, Kochi Campus of Amrita Vishwa Vidyapeetham and declare that the particulars furnished byhim/ her is correct and true and that if in future, any information is found to have been furnished falsely or incorrectly or any information suppressed to secure admission, I shall withdraw my daughter / son from the course without any claim or consideration of the period of study/stage of the course he/she completed. I hereby ensure that the candidate has read the “Instructions to Candidates” and “FAQ” before filling this Application Form. I shall not claim refund of fees already paid in the event of discontinuance of the study.

(Name and Signature of Parents)

Father: _____

Mother: _____

Name and Signature of Guardian other than Parents (If Applicable): _____

Relationship with the Applicant: _____

I fully agree with the above declaration.

I fully agree to abide by the rules and regulations of Amrita School of Arts and Sciences, Kochi if admitted to the course.

Place:

Date

(Signature of the applicant)

Name: _____

FOR OFFICE USE ONLY

Fees Paid: Rs. _____

Semester: _____

Rt. No. _____

C.D.Rt. No. _____

D.D _____ Dt. _____

Bank. _____