

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 by him/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 she/he 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: _____ (Name of the Applicant) _____ (Signature of the Applicant)

FOR OFFICE USE ONLY

Fees Paid: Rs. _____ Semester: _____
Rt. No.: _____ C.D.Rt. No.: _____
D.D.: _____ Bank: _____



AMRITA
VISHWA VIDYAPEETHAM
DEEMED TO BE UNIVERSITY

School of
Arts & Sciences

KOCHI CAMPUS

Brahmasthanam, Edappally North (P.O.), Kochi - 682 024, Kerala.
Tel: 0484 - 280 2000, 280 2899 Email: admissions.asaskochi@amrita.edu

Application Form Number

WBCOM

Application Form for Admission (2021) to Under-Graduate Programme

B.Com.

3 Years - 6 Semesters

Please read the **INSTRUCTIONS TO CANDIDATES** and **FAQ** before filling this Application Form. All entries to be made in **BLOCK LETTERS**. Fill in all the details in **CANDIDATES OWN HANDWRITING**. Enclose **ONLY** self – attested photocopies of Marklists. **INCOMPLETE APPLICATION FORM** is liable for rejection.

Affix recent
Passport Size
photograph

1. Name of the Applicant **as given in the S.S.L.C. Book** (leave blank space between first name and initials)

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2. Date of Birth:

D	D	M	M	Y	Y	Y	Y
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 Age:

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 3. Gender: Female* 4. Blood Group: _____

5. Place of Birth: _____ District: _____ State: _____

6. Religion: _____ Caste: _____ Community (SC/ST/OBC/OEC/Gen/Others): _____

7. Mother Tongue: _____ 8. Nationality: _____

9. (A) Address for Communication: _____

Post Office: _____ District: _____

State: _____ Pin: _____

Applicant's Phone No: _____

Phone No. (with STD Code): _____ Applicant's E-mail: _____

Father's Mobile Number: _____ Father's E-mail ID: _____

Mother's Mobile Number: _____ Mother's E-mail ID: _____

9. (B) Permanent Address: _____

Post Office: _____ District: _____

State: _____ Pin: _____

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: _____

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

Post Office: _____ District: _____

State: _____ Pin: _____ Mobile: _____

Phone No. (with STD Code): _____ E-mail: _____

Relationship with Student: _____

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

a) Name of the School / Institution: _____

b) Address with Pincode: _____

c) Group: _____

d) Month and Year of Passing: _____ e) Board / University: _____

f) Subjects Studied: _____

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 10th and 12th mark sheets)**

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

15. Major Extra Curricular Activities:

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

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

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

- The Hindu Indian Express Mathrubhumi Malayala Manorama Janmabhumi Kerala Kaumudi
- Alumni TV Channels MA Math Matruvani College / School last studied
- Facebook Amrita Website 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:

Date:

_____ (Name of the Applicant)

_____ (Signature of the Applicant)