

Application No.



**DE PAUL INSTITUTE OF SCIENCE & TECHNOLOGY**

DE PAUL NAGAR, ANGAMALY SOUTH- 683 573

TEL : 0484 - 2454336, 6582412 Fax : 0484 - 2454339

Application for Admission to the Master of Human Resource Management-20....

(Under Management/Merit/Community/NRI Quota)

(Affiliated to M.G. University, Kottayam )

(TO BE FILLED IN BY THE APPLICANT)

Affix Recent  
Photograph here  
(Passport Size)

1. Name in Full (BLOCK LETTERS) <input type="text"/>											
2. Permanent Address					3. Address for Communication						
Pin: <input type="text"/>					Pin: <input type="text"/>						
4. Tel. No. with STD Code:					Mobile No.						
5. E-mail:					6. Blood Group:						
7. Nationality of the Applicant :											
8 Age		9. Date of Birth			10. Place of Birth				11. Sex		
<input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>							Male/ Female		
12. Religion :		13. Caste :			14. Category :		SC	ST	OBC	OEC	General

**15. ACADEMIC QUALIFICATIONS**

MATRICULATION (S.S.L.C. & +2)				
Course	Board	Reg.No. & Year of Passing	% of Marks	School Attended
GRADUATION: BA/BSc/B.Com/BSW/LLB/.....(if any other)				
University		College		Main Subject
Details of Marks	Part I English	Part II Addl. Language	Part III Main & Sub	Total for all Three Parts (aggregate)
Maximum Marks				
Marks Secured				
Percentage				

Application No. <input type="text"/>	<b>(DIST) - ANGAMALY</b>	Reg.No: <input type="text"/>
DE PAUL NAGAR, ANGAMALY SOUTH - 683 573		
<b>MHRM ENTRANCE TEST / GD - HALL TICKET</b>		
(FILL IN CAPITAL LETTERS)		
* NAME IN FULL.....		
* ADDRESS.....		
DATE OF ENTRANCE TEST/GD.....		TIME.....
PLACE OF TEST.....		
* To be filled in by the Candidate		PRINCIPAL

Please Affix  
Passport Size  
Photograph  
here

16. Name, Present Address and Occupation of Parent / Guardian (Any contact / Phone No/ Mob.)			
17. Statement of Extra- curricular Activities.	a. Proficiency in Games & Sports(District. State, University)..... ..... b. NCC/NSS..... (NCC certificate from Director General and NSS certificate issued by the Vice Chancellor) c. Social Welfare Work..... d. Other Extra- curricular Activities, if any.....		
18. Stay in Hostel	<table border="1"> <tr> <td>Yes</td> <td>No</td> </tr> </table>	Yes	No
Yes	No		
19. Entrance Exam.	Reg No. <span style="float: right;">Rank No.</span> Details :		

**Declaration by the Applicant**

I do here by declare that all the facts mentioned in the application are true and correct. I do promise to obey all the rules and directions of the college authorities and to help in maintenance of discipline in the college while I am a student of this college

Place:.....

Date:.....

Signature of the Applicant

**Declaration by the Parent / Guardian**

I solemnly declare that all the facts mentioned in the application for admission submitted by my\*.....  
.....are true to the best of my knowledge and belief and I do here by undertake that my ward will abide by the rules and decisions of the college authority from time to time.

Signature of Parent / Guardian

\* Here enter the relationship of the guardian to the applicant and name of the applicant.

* Attested Copies of S.S.L.C., +2 & Degree Mark lists & Certificates should be submitted along with the Application * DD of Rs 500/- also should be enclosed * Final Year Students can also Apply
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**To be Filled in by the Office**

Register No. :	Rank No :
Date of Admission :	Admission No. :
Remarks :	

Principal

**DE PAUL INSTITUTE OF SCIENCE & TECHNOLOGY (DIST)**

( Run by Vincentian Fathers)

**(Affiliated to M.G. University, Kottayam )**

**DE PAUL NAGAR, ANGAMALY SOUTH- 683 573**

Phone: 0484 - 2454336, 6582412 Fax : 0484 - 2454339

E-mail : depaul@dist.ac.in Web : www.dist.ac.in / www. depaul.ac.in

**Our Pay Back is the Professional Excellence of Our Students**