



# KARNATAKA EDUCATION TRUST (R)

No, 32/2, Thirumenahalli, Jakkur Post, Yelahanka (H) Bangalore North,  
BANGALORE - 560 064.

## APPLICATION FORM FOR ADMISSION OF THE .....COURSE

APPLICANT'S  
PHOTO

### Application No.

Note: All entries must be made in English in Block (Capital) letters only.  
( Strike out which is not applicable)

1. Full Name of the Applicant *(As per S.S.L.C./ 10th Marks Card)	
2. Name of Father/ Guardian	
3. Date of Birth and Age	
4. Nationality	
5. Place of Birth	
6. Sex	Male / Female
7. Religion	
8. Mother Tongue	
9. Whatever belongs to S.C/S.T/B.C OR any other Reserved Category : Yes/No	If yes, copy of the Relevant Certificate must be enclosed
10. Occupation of parent/ Guardian	
11. Annual Income of parent/ Guardian	
12. Local Address of Applicant	a) Permanent Address of applicant
Phone :	Phone :
13. Name of the College last attended	
14. Qualifying Exam Passed	10th / 10+2 other. If other Please specify
15. Month & Year Passing	

16. Marks obtained in the Qualifying Examination (10+2)  
(Xerox copy to be attached along with the application)

SL. No	SUBJECTS	MARKS OBTAINED	PERCENTAGE
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

### DECLARATION BY THE CANDIDATE

1. If I am admitted to the institute . I agree to abide by all rules and regulation which are in force and which may be framed from time to time in respect of admission to the institution and hostel.
2. I hereby promise that during the period of my stay in the institute, I will not do anything which is the against the rules and regulation of the college and hostel, either inside or outside and that I will not do anything that comes in the way of its orderly and smooth working and discipline.
3. I agree to abide by the rule that I may be expelled from the institution for misconduct, lack of interest in studies, misbehavior, indiscipline or continuous failure in the examinations. I agree to the condition that in case any information furnished in the application is found to be false this application for admission may be cancelled and the fees paid may be forfeited.
4. I agree to stay in the hostel for full terms of the course .

Date:

Signature of the Candidate  
NAME :

### DECLARATION BY THE PARENT/ GUARDIAN

I declare that I am fully aware of the financial obligation of admitting my ward into the institution : and what I can afford pay all the costs and the prescribed fees to the institution under the rules framed by the management from time to time ..... I also own responsibility for all particular mentioned in the application by my son .daughter/ward.....i hereby agree to pay all the fees and breakage charges, if any, of my ward. I shall be answerable and responsible for the conduct/character and behavior of my ward, during his/her stay in the institution . Moreover, I hereby accept the decision of the Principal in respect of my ward in all matters relating to disciplines ad attendance as binding on me.

Date :

Signature of the Parent/Guarian  
NAME :

### FOR OFFICE USE ONLY

ADMITTED TO.....ON.....

FEES COLLECTED RS.....VIDE RECEIPT NO.....

DATE:.....

Signature of the Clerk/Accountant

Signature of the Principal