

# Krupanidhi Group of Institutions

(Managed by Krupanidhi Educational Trust)

No. 12/1, Chikkabellanbur, Carmelaram Post, Varthur (H), Bangalore - 560035

www.krupanidhi.edu.in

## APPLICATION FORM

APPLICATION NO.:

Application for Admission to

Passport Photo  
of the Applicant

1. Name of the applicant  
(in block letters)

2. Father's Name

a) Father's Qualification

Occupation

3. Mother's Name

a) Mother's Qualification

Occupation

4. Sex

Male

Female

5. Date of Birth

dd

mm

yyyy

6. Nationality & Religion

7. Whether SC/ST/BC or Any other reserved category

(Enclose photocopy of caste certificate) Certificate in support of Reservation claim

8. Permanent Address

Tel/Mobile.....

Email.....

9. Local Address

10. Name & Address of  
the Institute last  
studied

11. Results

Exam Passed	Name of the Board/University	Year of Passing	Combination	Reg. No.	% of Marks

12. Medium of Instruction : **ENGLISH**

13. Languages Opted :

Kannada

Hindi

French

Telugu

Tamil

Sanskrit

Malayalam

14. Documents to be submitted (original + 3 sets of photocopy, please TICK  in the box for documents submitted)

- |   |   |
|---|---|
| <input type="checkbox"/> 10 <sup>th</sup> Standard or Equivalent examination marks card           | <input type="checkbox"/> Six copies of passport size photograph |
| <input type="checkbox"/> 12 <sup>th</sup> Standard or Equivalent examination marks card           | <input type="checkbox"/> Two stamp size photographs             |
| <input type="checkbox"/> 3 Years Degree Marks Cards issued by University last studied             | <input type="checkbox"/> Caste Certificate if any               |
| <input type="checkbox"/> Migration Certificate issued by the Board/University last studied        | <input type="checkbox"/> Medical Fitness Certificate            |
| <input type="checkbox"/> Character Certificate issued by the Head of the Institution last studied | <input type="checkbox"/> Copies of Passport                     |
| <input type="checkbox"/> Transfer Certificate issued by the Head of the Institution last studied  | <input type="checkbox"/> Copies of Student Visa                 |
| <input type="checkbox"/> Copy of Permanent Address Proof  |   |

15. Combinations :

<b>1</b> _____	<b>3</b> _____
<b>2</b> _____	<b>4</b> _____

16. Proficiency in Games / Sports :  YES  NO

17. Do you seek admission to the Hostel :  YES  NO

### ■ Declaration By The Candidate

I..... S/o | D/o..... agree to abide by the rules and regulations of Krupanidhi Group of Institutions in force and amended/alterd from time to time. I assure that I will not indulge in any activity that would tarnish the image of the Institution. I am aware that the management of Krupanidhi Group of Institutions has every right to suspend/dismiss me from the College or even debar from the University in case I breach the code of conduct. I am aware that the fees once paid will not be refunded under any circumstances. I am aware that my admission is subject to approval of the concerned University

Place: \_\_\_\_\_  
Date: \_\_\_\_\_ Signature of the Candidate

### ■ Declaration By The Parents

I hereby certify that the declaration made above has been duly signed by my ward in my presence. I shall be responsible for the payment of all the fees and shall not ask for refund of the fee paid in case of discontinuation of course or cancellation of my ward. I shall also stand responsible for the good conduct and good behavior of my ward and I shall ensure that he/she attends the classes, class tests and viva regularly during the period of His/Her studying in the college.

I understand that a student may be asked to leave the college at any time for misbehavior and irregular attendance. Further, I also undertake to abide by the terms and condition prescribed in Annexure -A of this application

Place: \_\_\_\_\_  
Date: \_\_\_\_\_ Signature of the Parent  
(Father/Mother/Gaurdian)

### Verified and Found correct

The Candidate may / may not be admitted to..... Admission Committee

#### For Office Use only

Admitted to.....  
On date.....  
Fee Collected Rs.....  
Receipt..... Date.....

Principal

Director