



SCMS SCHOOL OF TECHNOLOGY AND MANAGEMENT

SCMS Campus, Prathap Nagar, Muttom, Aluva, Cochin – 683106

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DEPARTMENT OF COMPUTER APPLICATIONS

APPLICATION FOR ADMISSION TO

Master of Computer Applications (M.C.A.) – 2012

(Approved by AICTE & Affiliated to Mahatma Gandhi University)

Instructions for filling the Application Form

- 1) Fill in the application form in Capital Letters only.
- 2) Please enclose attested photocopies of all testimonials along with the form. All certificates (originals) should be produced at the time of interview.
- 3) Make sure you sign and put the date on the form.
- 4) Partially filled up or incorrectly filled up applications will be summarily rejected.

1. Name :

2. Sex(Please tick) Male Female

3. Age & Date of Birth years , DD MM YYYY

4. Nationality

5. Religion

6. Whether belonging to reservation category Yes No

If yes, name the category

7. Permanent Address

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State.....PIN.....

8. Mailing Address.....

.....

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State.....PIN.....

9. Contact Telephone No..... Mobile

email :

10. Father's Name.....

Occupation..... Contact Phone.....

Affix a recent
passport size
photo here

11. Mother's Name.....
 Occupation..... Contact Phone

12. Educational Qualifications (enclose attested copies of Mark sheets & Certificates)

Name of Exam	Year of Passing	Board/Institution	Marks Obtained	Max. Marks	% of Marks
Secondary School					
Higher Secondary/Plus two					
Graduation					

13. Any other achievement - Academic or otherwise

14. Documents to be submitted along with the application. (Failure to submit photocopies of relevant certificates will disqualify the application). Downloaded application should be submitted along with DD worth Rs. 650/- drawn in favour of Director, SSTM

- Secondary School Certificate Higher Secondary Graduation
 PG / Professional Stamp size photo Application Fee /DD

DECLARATION BY APPLICANT

I hereby declare that the particulars given by me in this application and the testimonial submitted in support of them are true to the best of my knowledge and belief. If any discrepancies are found in it at a later stage SCMS School of Technology & Management will have the right to ask me to withdraw from the Programme after paying the balance tuition fee. I also confirm that I shall abide by all rules and regulations of the institute in the conduct of the Programme.

Date : Applicant's Signature
 Place : Name

DECLARATION FROM GUARDIAN / PARENT

I hereby agree to whatever that has been stated above by my son / daughter / ward in respect of his / her enrolment at the SCMS School of Technology and Management .

Place : Signature
 Date : Name