



TAMIL UNIVERSITY
THANJAVUR – 613 010

COLOUR
 PHOTO

APPLICATION FORM FOR POST-GRADUATE(M.A/M.Sc) FULL-TIME

The last date of the receipt and submission of filled-in applications :

1. NAME(IN CAPITAL LETTERS) :

2. NAME OF FATHER/GUARDIAN

3. OCCUPATION OF FATHER/GUARDIAN & ANNUAL INCOME	OCCUPATION	INCOME
	<input type="text"/>	<input type="text"/>

4. ADDRESS FOR COMMUNICATION WITH CELL PHONE NUMBER :

5. PERMANENT ADDRESS :

6. DATE OF BIRTH :	DAY	MONTH	YEAR
	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. SEX :	MALE	FEMALE	OTHER GENDER
	<input type="text"/>	<input type="text"/>	<input type="text"/>

8. NATIONALITY :	INDIAN	OTHERS
	<input type="text"/>	<input type="text"/>

9. COMMUNITY :	OC	BC	OBC	DC	SC	ST
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

10. CASTE :

11. AADHAR NUMBER	12. PAN NUMBER	13. E-MAIL ID
<input type="text"/>	<input type="text"/>	<input type="text"/>

14. PHYSICALLY HANDICAPPED :
(IF YES ATTACH CERTIFICATE)

YES	NO
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15. EDUCATIONAL QUALIFICATIONS : _____
(UNDER GRADUATE DEGREE)

REG.NUMBER	DATE & YEAR OF PASSING	SUBJECT	MARKS OBTAINED		NAME OF COLLEGE/ UNIVERSITY	% OF MARKS/ REGULAR/ DISTANCE MODE/NO. OF ATTEMPT
			TOTAL	SECURED		

16. COURSE APPLIED FOR : _____

17. DETAILS OF ENTRANCE EXAM FEE PAID :

A. NAME OF BANK :
CHALLAN NUMBER : **DATE:**

B. DEMAND DRAFT NUMBER : **DATE:**

DATE:
PLACE:

APPLICANTS SIGNATURE

ENCLOSURES TO BE ATTACHED WITH THE FILLED IN APPLICATION

- Self Attested Photocopies of 10th, 12th Mark sheets
- Self Attested Photocopies of U.G consolidated Mark list
- Self Attested Photocopies of certificates pertaining to the qualifying examination passed
- Self Attested Photocopies of Community, Transfer certificates and others
- A recent Passport Size Photo pasted on the first page of the application form
- Aadhar card Xerox