

#### **DE PAUL FIRST GRADE COLLEGE**

(Affiliated to the University of Mysore)

Belagola, Srirangapatna Tq, Mandya Dist - 571606

Phone: 8971397489, 0821-2972047 E-mail: admission.dpdc@depaulcollege.in

Affix a recent passport size color photograph

# APPLICATION FOR ADMISSION TO BCA, BA, BCom, BBA

Α.	PERSONAL DETAILS		(As	pe	r c	erti	ifica	ate	of	qu	alif	yin	g e	xa	m)					
1.	Name of Applicant:																			T
		(In	BLC	OCK	(le	ttei	rs, a	allo	)W S	ра	ce	bet	we	en	Na	me	s)			
2.	Age: (As on the date)																			
3.	Date of Birth:																			
					(	(DD	/M	IM,	/ <b>Y</b> Y	YY)										
4.	Sex:	M				F			В	loo	d g	grou	ıp :							
5.	Place of Birth:									_ S	tat	e								
6.	Nationality:													_						
7.	Religion:																			
8.	Caste:																			
9.	Sub Caste:																			
10	). Category:	SC				S	Γ			I			I	Α			II.	4		
		Ш	В			Ш	Α				Ш	В				ЗM				

11.	Mother Tongue:							
12. /	Address for Commun	icatio	n:			 	 	
13.	Permanent Address:			PIN	;			
				PIN	:			
14. (	Contact No: (Home) (Candid				5 			
15. I	E-mail Id: (Candidate)	1						
	FAMILY DETAILS							
	. Father's Details:							
	Name							
	Name							
	Name Education							
	Name Education Occupation							
•	Name Education Occupation Annual Income							
	Name Education Occupation Annual Income Contact No.							
	Name Education Occupation Annual Income Contact No. E-mail Id  Mother's Details: Name							
	Name Education Occupation Annual Income Contact No. E-mail Id  Mother's Details: Name Education							
	Name Education Occupation Annual Income Contact No. E-mail Id  Mother's Details: Name Education Occupation							
	Name Education Occupation Annual Income Contact No. E-mail Id  Mother's Details: Name Education Occupation Annual Income							
	Name Education Occupation Annual Income Contact No. E-mail Id  Mother's Details: Name Education Occupation							

3.	<b>Guardian Details:</b>								
	Name								
	Education								
	Occupation								
	Annual Income								
	Contact No.								
	E-mail Id								
	Address								
4.	Details of Siblings:								
		Sex				ried	ied		
	Name	М	F	Age	Education	Υ	N	Place	
5.	Family Status: Nucle	ear		Joi	nt HUF				
6.	Have You Availed Any	Edu	uca	tion L	oan: Y	N			
7.	Are You Planning for A	Any	Ed	ucatio	nal Loan: Y	N			
	<b>PROOF DETAILS</b> Do you possess an Aa	dha	ar (	Card?	Υ	N			
	If yes, provide Aadhaa	ar ca	ard	No:					
b) Do you hold a Driving License? YN						LLR:	YN		
	If yes, provide the No.								
c)	Do you hold a Passpor	τ?			YN				
	If yes, provide the No	•							

d)	Do you hold Election ID? Y If yes, provide the No.	N						
(N	ote: Photocopy of any one of the	e above mentione	ed document shoul	d be attached.)				
D. B	ANK ACCOUNT DETAILS							
Do	you hold a bank account?	YN						
b) c)	Account No:							
E. D	E. DETAILS OF QUALIFICATION EXAMINATION PASSED							
b)	Qualification Examination: Name of Board:			•••••				
d) e)	Medium of Instruction: Marks Obtained:		No. of Attempts:					
	LANGUAGES / SUBJECTS	MAXIMUN	MARKS	% OF MARKS				

LANGUAGES / SUBJECTS	MAXIMUN MARKS	MARKS SCORED	% OF MARKS 000.0
TOTAL OF ABOVE			

#### F. CHOOSE THE COURSE (Tick relevant choice) First Language: English Kannada Hindi Malayalam Tamil Telugu French Second Language (Tick): 1. Bachelor of Arts (BA) Economics, History, Political Science (EHP Economics, Sociology, Political Science (ESP) English, History, Political Science (EnHP English, Sociology, Political Science (EnSP) English, Sociology, Psychology 2. Bachelor of Commerce (B.Com) 3. Bachelor of Business Administration(BBA) 4. Bachelor of Computer Application (BCA) G. CHOOSE THE COACHING (Tick Relevant Choice) **Civil Services Chartered Accountant Company Secretary ACCA Aviation** H. CERTIFICATE COURSES **Animation, Graphic Designing Organizational Psychology Artificial Intelligence** & Web Designing **Supply Chain and Digital Marketing & Communication Skills Logistics Analytics Data Analytics** in English I. CHOOSE YOUR AREAS OF INTEREST (Tick Relevant Choice) **Violin** Guitar Piano Vocal **CHOOSE YOUR AREAS OF INTEREST (Tick Relevant Choice)** Cricket Hockey B.minton V.ball Swimming | **K. HEALTH DETAILS** 1. Height in cms: ...... Weight in kgs: ...... Blood Group: 2. Allergic To: 3. Do you have any chronic illness: Ν If ves. furnish details 4. Are you on any medication? Ν If yes furnish details: 5. Whether you are physically challenged: Ν If yes furnish details:

### L. OTHER DETAILS

1.	Hobbies:
2.	Have you ever participated in sport/art events? Y N
	If yes, furnish details:
	a. Name of the event:
3.	Have you ever participated in cultural events? YN
	If yes, furnish details:
4.	a. Name of the event:
	If yes, furnish details:
	a. Name of the event:
5.	Have you ever participated in any of the following activities? If yes, tick the relevant ones:
	N.C.C N.S.S Scouts& Guides J.Y. Interact Rotaract /LION/JC
6.	Do you have merit certificate related to any activities such as Drawing, Animation, Photography, etc.?  (If yes, attach the photocopies)

7.	Languages	Known				
	1)	2)	3)	4)	5)	
8.	Soft Skills	– Computer /	Typing Course	s:		••••
9.	-	ner programs a	attended:	YN		
10	•	programme a	attended:	YN		
11	 . Vegetaria	n 🗌	Non-vegeta	arian 🗌		
12	. Do you w	ant hostel fac	ility?	]		
13	•	ever been sus e the reason:	spended by the	e previous institu	tions? Y N	
14	-	ever been arr nish details)	ested by police	e for any offence	? <b>Y</b> N	
15		nish details)	gainst you per	nding? Y N		
M. PER	SONALITY I	DETAILS				
1.	Your goal:					
2.	Strength:					
3.	Weakness:					
4.	Role Mode	l:				

# **DECLARATION**

sincerely affirm that the statements ma application form, as also in all enclosures information furnished therein is found fal forfeiture of my seat without any refun- hereby agree to abide by the rules and re	(applicant name), hereby solemnly and ide and the information furnished in the thereto, submitted by me, are true. If the lse, I am liable to criminal prosecution and d/compensation/enquiry/further advice. I egulations of De Paul College. I have made rything in this application form including
Place: Date://20	(Signature of the applicant)
l, ward (applica	(parent name) have no objection to my ant name) joining for the course of study by him/her. I shall also be responsible for er stay in the college.
Place:/20	(Signature of the parent)
FOR OFFICE	E USE ONLY
Admitted:	(candidate name)
Coursefor the year	on (date of admission).
Admission No:	
	Signature (Principal)



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# **ENQUIRY FORM FOR ADMISSION**

1. Name of Applicant:	
2. Date of Birth:	
(DD/MM/YYYY)	
4. Place of Birth:	State
Blood group :	
5. Nationality: 6. Religion:	Caste:
7. Sex: 8. Mother Tongue:	
10. E-mail Id:	
11. Address:	
12. Course Intended To Opt (Tick)	
B.Com BBM BA BCA	
13. Coaching Intended To Opt (Tick Relevant Cho	oice)
Civil Service Chartered Accountant	
ACCA Aviation	Artificial Intelligence
14. CERTIFICATE COURSES (Tick Relevant Choice)	
Supply Chain & Artificial Intelligence Logistic Analytics	Animation, Graphic Designing 8 Web Designing
Communication Skills Digital Marketing & Data Analytics	Organizational Psychology
14. Do you want hostel facility? Y/N	, ,,
15. Percentage of Marks (Obtained/Expected):	
Date://20	
,,,	Signature

(NB: Admission solely at the discretion of the management)