



# SHRI MARUTHI GROUP OF INSTITUTIONS

(UNDER GLOBAL PEACE EDUCATION TRUST)

## APPLICATION FORM

### Personal Details

(USE ONLY BLOCK LETTERS)

Applicant's  
Photo

Mr.  Ms.  Mrs.

Name of the Applicant

Date of Birth

Gender   Marital Status

Caste  SC  ST  OBC  GN

Aadhaar No

Place of Birth .....

Nationality ..... Religion .....

Father's Name ..... Mother's Name .....

Father's Occupation ..... Mother's Occupation .....

Contact Number ..... Contact Number .....

Medical Disability (If any) ..... Blood Group .....

Phone  Mobile

Email

Permanent

Address

Dist.  State  PIN

Present

Address

Dist.  State  PIN

## Select Programme

G.N.M  B.Sc (N)  PB B.Sc (N)  M.Sc (N) .....

D. Pharmacy  Paramedical .....

## Educational Details:

Class	Year of Passing	Board / University	Subjects Studied	Marks Obtained	Max Marks	% of Marks
Class X			English			
			Science			
			Maths			
			<b>TOTAL</b>			
Class XII			Physics			
			Chemistry			
			Biology			
			<b>TOTAL</b>			
UG						

Note : If appearing for the final year / Final Semester graduation examination, then please mention the month and year of the examination

Month :

Year :

Signature of Guardian / Parent

Signature of Applicant

## Declaration

I hereby certify that all the information furnished in this application for getting admission in **SHRI MARUTHI GROUP OF INSTITUTIONS** are correct and complete to the best of my knowledge. I agree to abide by all the rules and regulations of the Institution. I understand that withholding or giving false information will make me ineligible for admission. I understand the fee paid to **SHRI MARUTHI GROUP OF INSTITUTIONS** are neither refundable nor transferrable at any circumstances.

Date :

Place :

Signature of Applicant

## SHRI MARUTHI GROUP OF INSTITUTIONS

21/A, Doddabyalakere, Hessarghatta Road, Shivakote, Yelahanka, Bengaluru-560 089

Recognised by Govt. of Karnataka, Affiliated to RGUHS, KSDNEB & Approved by KNC, INC, PCI & Karnataka Paramedical Board