

Application No: _____



THE INDIAN AGRICULTURE COLLEGE

Affiliated to Tamilnadu Agriculture University, Coimbatore.

Raja Nagar, Radhapuram - 627 111

Tirunelveli Dist., Tamilnadu.

APPLICATION FOR B.Sc., (AGRICULTURE) ADMISSION FORM 20 - 20

Personal Information

Name of Candidate : _____
(As in XII Mark sheet)

Father's Name : _____

Mother's Name : _____

Date of Birth : _____

Gender : _____

Category — Community (tick): ☐ OC ☐ BC ☐ BCM ☐ MBC ☐ DNC ☐ SC ☐ SCA ☐ ST

Religion (tick) : ☐ HINDU ☐ CHRISTIAN ☐ MUSLIM ☐ OTHER

Name of the Caste : _____

Code No. of Caste : _____

Place of Birth : _____

Citizenship : ☐ INDIAN ☐ FOREIGNER ☐ NRI

Mobile Number (candidate) : _____

Father's Mobile No : _____

Mother's Mobile No : _____

Land Phone Number : _____
(with STD Code)

First Graduate in the Family : ☐ Yes ☐ No

Email ID : _____

Affix photo

Verification of Identification

10th Mark sheet Serial No :

12th Mark sheet Serial No (or) :

TMR Code

12th Roll No. / Registration No :

12th Passing Year :

No. of Appearances (Attempt) :

*Attach Copy of Mark sheets of 10th & 12th standard

Correspondence Address

Door No :

Street Name :

Place :

District :

State :

Country :

Pin Code :

Permanent Address

Door No :

Street Name :

Place :

District :

State :

Country :

Pin Code :

Higher Secondary School Marks Detail

Passing Year :

XIIth Std. (+2) :

Board :

Qualifying :

Exam Passed :

Qualifying Exam Subject Group :

Verification of Identification

Sl. No.	Subject	Marks Obtained	Maximum Marks
1			200
2			200
3			200
4			200

Medium of Instruction : English / Tamil / Malayalam / Hindi / Other

Nativity Detail

Nativity :

Particulars of Institution Last Studied

Year	Name of School	Class in which Studied	Place	State

Enclosure (please [✓])

1. Mark sheets of H. Sc / Pre - degree / Degree ☐

2. Transfer Certificate ☐

3. Community Certificate (If applicable) ☐

Please enclose the photocopy of the mark sheets / certificates duly attested by an attesting officer.

Declaration

I hereby certify that the informations furnished above are correct and true to the best of my knowledge. If found otherwise, I undertake to forego my candidature and seat in the college if selected.

I do hereby undertake that, I will not ask for refund of any fee paid to the college.

I am willing to study in the degree and will not claim change of degree / campus.

I do hereby undertake to abide by the rules in vogue and orders of the authorities of the college.

Signature of Parents

Signature of Students

Name of Parent :

Name of Student :

Date :

Date :

Father / Mother / Guardian

OFFICE USE

Admission in : Counseling ☐ Management ☐

Students Account No :

Whether the student need Hostel facility : Yes ☐ No ☐

Checked by