

Attach Recent Passport Size Photograph

## **Application Form No.:**

To be filled in by student. Use BLOCK letters only

Photograph	To be filled in by student. Ose BLOCK letters only		
	Name		
	Date of Birth	Month	Year 🗌 📗 📗
	Sex 🗌	Male 🗌	Female 🗌
	Country of Citizenship		
	For Office Use Only		
	Student ID No.		
	Program		
	Remark / Note		
Student Signature	Reference		
	FOR OFFICE U	SE ONLY	

Р	rograms		
	Please fill in the form using ballpo	oint pen only. Tick the course you wish to	apply for circle the Specialization applicable.
Pł	n.D		
	Doctor of Philosophy : CSE / E	CE / Mechanical / Chemistry	
Po	ost Graduate		
	Master of Technology (VTU)	☐ Production Technology (Med	ch)
		Structural (Civil)	
		☐ Digital Electronics & Commu	unication (ECE)
		☐ Computer Science	
	Master of Business Administra	ation (MBA) - VTU	
	Master of Business Administra	ation (MBA) - BCU	
	Master of Commerce (M.Com.) - BCU Bangalore KGF		angalore
	Master of Computer Applicati	on (MCA) - BU	
	MSc - Nursing	Medical Surgical Nursing	
		Community Health and	
		OBG Nursing	
Under Graduate			
	Bachelor of Engineering (BE)	☐ CSE ☐ AI&ML ☐ AI&DS ☐ Cy	ber Security ISE ECE CIVIL MECH
	Bachelor of Business Administration (BBA)   Bangalore   KGF		
	Bachelor of Business Administration in Aviation Management Bangalore KGF		
	Bachelor of Computer Application (BCA)   Bangalore   KGF		
	Bachelor of Commerce (B.Com) Bangalore KGF		☐ Bangalore ☐ KGF
	Bachelor of Science (B.Sc) in Computer		
	Bachelor of Hotel Management (BHM)		
	Bachelor of Dental Surgery (BDS)		
	Bachelor of Science in Nursing	g (B.Sc)	
Pre - University / 10+2			
	Science PCMB	☐ PCMCs ☐ PCME	☐ Bangalore ☐ KGF
	Commerce	☐ EBACs ☐ HEBA	☐ Bangalore ☐ KGF
01	thers		
	General Nursing & Midwifery (GNM)		☐ KGF
	Diploma in Hotel Management (DHM)		☐ KGF

	Information								
Name	S. a. L.		N.4 + I-			V			
Date of B	irtn	Month			Year				
Sex	:		Male	A			Female		
Place of B			Home Sta	te			Mother Tongue		
Nationalit	-		Religion				Caste		
Tel/Mobil	e Guardian Inf	ormatic	Fax			E-mai	I		
				amo		Guard	lian Name	<u> </u>	
Relations	ther Name Guardian Name								
Occupation		Annual Income							
Address	711		Ailliailli	COTTLE					
Address						Pin			
Tel/Mobil	e		Fax			E-mai	l		
Local Co	ntact Inform	nation							
Name									
Relations	hip								
Occupation	-		Annual In	come					
Address									
						Pin			
Tel/ Mobi	le		Fax			E-mai	l		
Le	Level Name of the Institution Board / University %a		%age	Class	Year of passing				
Secondary	Secondary								
Higher Sec	Higher Secondary/PUC								
Degree	ograa		Correspondence Course?						
	Undergraduat	e Degree	Marks Details If C	GPA given, please giv	ve p	ercentage c	onversion	alongside	
Year / Sem	Percentage	Class	Year of Passing	Rank / Distinction if any	1	assed all ex irst attemp		No. of Subjects repeated	
1 <sup>st</sup>									
2 <sup>nd</sup>									
3 <sup>rd</sup>									
4 <sup>th</sup>									
5 <sup>th</sup>									
6 <sup>th</sup>									
7 <sup>th</sup>					$\vdash$				
8 <sup>th</sup>									
Overall									
Extra curricular activities (Details of sports and extracurricular Activities)									
Recognition achieved at (enclose photocopies of certificates, if any)									
□ National level □ State level □ Intercollegiate level				level					
☐ Other (please specify)									
	orcuse specify	ı							

Your Career Objective (In a concise paragraph tell us how your career objectives will be served by your course at Sambhram)				
,				
Hostel Accommodation	☐ YES ☐ NO			
How did you hear of Sambhram ?				
☐ Recommended by friend / relative	☐ Newspaper Advertisement			
☐ Recommended by academic staff / student ☐ Sambhram Website				
Exhibition / Seminar	☐ Institute representative			
☐ Direct Enquiry	Other (Please Specify)			
Copies of annexure enclosed (Attach 2 Sets of attested photocopies)				
☐ Class X / Equivalent Marks card	8 recent color passport size photographs			
☐ Class XII / Equivalent Marks card	☐ Migration certificate (for Non Karnataka Students only)			
Graduation Marks card	☐ Caste certificate (in case of SC/ST/Cat1 students only)			
☐ PDC / Degree certificate	☐ Validity certificate (in case of SC/ST/Cat1 students only)			
☐ Transfer certificate	☐ HIV clearance certificate*			
☐ Medical fitness certificate	☐ Equivalence certificate* (From AIU, Delhi)			
☐ Bio - Data	☐ No Objection Certificate* (NOC) (From MHRD/Delhi)			
☐ 2 letter of recommendation	2 letter of recommendation Passport & Visa*			
*Application for foreign nationals / NRIs / PIOs only				
I, the candidate seeking admission to the Sambhram Institutions Program, Solemnly declare that I will strictly abide by the rules and regulations in force and those that may be framed hereafter, and will not indulge in n any unsocial, anti-national activities, I will avoid any act of indiccipline and breach of rules. I further agree to reimburse any damage of furniture, apparatus, etc. which may be caused by carelessness or wantonners on my part.				
Date Place Sign	nature of Student Signature of Parent/Guardian			
Only duly filled application along with the required enclosures will be accepted by the college				
Remarks (For Office Use Only)				