

18. PARENT'S INCOME (₹) PER ANNUM

Below 50,000	50,001 to 1,00,000	1,00,001 to 2,00,000	2,00,001 to 4,00,000	Above 4,00,000

19. PARENT'S OCCUPATION

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20. MEDIUM OF INSTRUCTION TAKEN IN YOUR PREVIOUS EDUCATION

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21. DETAILS OF 10TH / 12TH / DIPLOMA COURSE COMPLETION

CLASS / COURSE	SCHOOL / COLLEGE	BOARD	REGISTRATION NUMBER	MONTH / YEAR OF PASSING	% OF MARKS
10 TH / SSLC / SSC					
12 TH / PUC					

22. ANY OTHER ADDITIONAL INFORMATION WISH TO PROVIDE

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23. HOSTEL REQUIRED

YES	NO

24. SPORTS ACHIEVEMENT(S)

STATE	NATIONAL	INTERNATIONAL	NONE

Equity and Disability

If you have a disability, which means that you may require additional help at our College, it is very important that you provide the following information. It will not effect your admission to the college.

Type of Disability: (Specify in Brief about it and attach a brief statement about what your needs will be)

The Following Copies / Original certificates enclosed (Tick Whichever Applicable)

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|---|--------------------------|--|--------------------------|
| 1. Pass port Size photo (4Nos.) & Stamp Size Photo (4 Nos.) | <input type="checkbox"/> | 6. Caste Income Certificate. | <input type="checkbox"/> |
| 2. 10 th Std. Original Marks Card | <input type="checkbox"/> | 7. Migration Certificate | <input type="checkbox"/> |
| 3. 12 th (PUC) Std. Original Marks Card | <input type="checkbox"/> | 8. AADHAR Card of Student | <input type="checkbox"/> |
| 4. Transfer Certificate / School Leaving Certificate | <input type="checkbox"/> | 9. PAN Card of Parent / Guardian (Compulsory for All) | <input type="checkbox"/> |
| 5. Character & Conduct Certificate | <input type="checkbox"/> | 10. Copy of valid VISA and PASSPORT (for foreign Students) | <input type="checkbox"/> |
| | | 11. Valid Address Proof | <input type="checkbox"/> |

26. DECLARATION

I hereby declare that I have carefully read the instructions and particulars supplied to me and that the entries made in this application form are correct to the best of my knowledge and belief. I note that the decision of the Institution is final in regard to selection for admission. If selected for admission, I promise to abide by the rules and regulations of the Institution and the guidelines in the prospectus. The Institution shall have the right to expel me from the Institution at any time after admission, provided it is satisfied that I was admitted on false particulars furnished by me or my antecedents prove that my continuance in the Institution is not desirable. I agree that all disputes are subject to the jurisdiction of the courts at Bangalore only. Fees paid on counseling and admission will not be claimed back under any circumstances.

.....
SIGNATURE OF PARENT/GUARDIAN

.....
SIGNATURE OF APPLICANT

.....
DATE

Sri Nisarga Vidyavardaka Seva Trust (R.)

SARANG GROUP OF EDUCATIONAL INSTITUTIONS

(Recognized by Govt. of Karnataka, Approved by AICTE / DTE / PCI and Affiliated to RGUHS Karnataka.)

E-mail: srinisargavidyavardaka@gmail.com

Websites: www.srinisarga.org, www.sarangpolytechnic.in, www.sarangpharmacy.in

Registered Office and Campus Address: Opp. Indian Oil Petrol Bunk, Kunigal Road, Gulur, Tumakuru - 572 118. Karnataka.

Phone: +91-816-2246115 / 9986391244

UNDERTAKING BY PARENTS / GUARDIAN

I have read the rules and regulations of the College. My Son / Daughter / Ward has signed the undertaking & declaration in my presence I agree to extend my full co-operation to the college authorities in ensuing that my son / daughter / ward abides by all the rules. I further agree to visit the college as often as possible to acquaint myself about the attendance and progress of my son / daughter / ward.

UNDERTAKING BY STUDENT

I agree to abide by the Regulations / Ordinances adopted by the University or College for the maintenance of the discipline among student in the College / Department / Hostels. I will neither involve myself in any unlawful or provocative or communal or anti-social or political activities nor cause physical harm to any fellow student or teacher or official. I also agree not to involve myself in causing the damage to the college or any university property. **I shall not indulge myself in ragging in any form.** I give this undertaking with the full Knowledge that any breach of this on my part is liable for the cancellation of my admission in the College / Department / Hostel / University.

LIABILITIES OF PARENT / STUDENT

I hereby declare that I have been admitted to the said course overlooking the candidate of other applicants who are willing to pay the fees as stipulated by the authorities. Therefore I hereby unconditionally indemnify the college authorities from all claims and liabilities arising out of cancellation of the seat allotted to me and I hereby undertake not to claim any refund whatsoever of any amount paid by me to the college authorities.

SIGNATURE OF PARENT/GUARDIAN

SIGNATURE OF APPLICANT

DATE

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E-mail: srinisargavidyavardaka@gmail.com Websites: www.srinisarga.org, www.sarangpolytechnic.in, www.sarangpharmacy.in

Registered Office and Campus Address: Opp. Indian Oil Petrol Bunk, Kunigal Road, Gulur, Tumakuru - 572 118. Karnataka.

Phone: +91-816-2246115 / 9986391244

FOR OFFICE USE ONLY

Mr. / Ms. / Mrs. is admitted to
..... Course Branch and
for Semester under..... quota with the fee of
Rs. vide Receipt No. Dated

Remarks :

Cashier / Accountant

Office Superintendent

Admission approved by Principal

Signature of Principal
with seal & Date

