



Kerala State Rutronix Centre Infomata Campus Karuvarakundu, Kizhekkethala Karuvarakundu

Application No:
APPLICATION FORM FOR COMPUTER ADD ON COURSES

| Name of the Course | |
|--|-----------------------|
| 1. Name (in block letters as in SSLC) | |
| 2. House Name/ Expansion of initials | |
| 3. Semester & Programme Currently Studying | Ad No. |
| 4. Date of birth as in SSLC: | 5. Age: 6. Gender: |
| 7. Nationality: 8. Religion | n: 9. Caste: |
| 10. Category: (SC/ST/OBC/General or Specify) | : 11. Mobile No: |
| 12. WhatsApp No: | 13. E-mail: |
| 14. Name of Father: | 15. Name of Mother: |
| 16. Address of Applicant. | |
| | Pin: |
| | Phone: |
| Name & Sign of Applicant: | Name & Sign of Parent |
| | |
| | |
| Date: | Place: |
| Off | ice Use Only |
| Class Time | |
| Total Course Fee | |
| Fee Details | |
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| Admitted By | |
| Remarks: | |
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