

APPLICATION FORM

ST JOHN'S COLLEGE OF EDUCATION

(Affiliated to Osmania University & Recognized by the NCTE)

CHENGICHERLA, GATKESAR-MANDAL

RANGAREDDY: DISTRICT-500092.

Academic Year: 20 - 20

Affix Passport size Color Photo graph here

College code: 2511		Course:			
Duration of the Course:		Course Year:			
Medium:					
Student Name: (As per Qualifying Examination)					
Father Name:					
Mother Name:					
Mother Maiden Name:					
Parent Profession:					
Family Annual Income (Rs.):					
Distance from College to the place	e of Residence (Kms)				
Type of Residence: Day Scholar/	Hostel/ Student Mana	ged Hostel			
Gender:					
Date of Birth: (DD/MM/YYYY)					
Blood Group:					
Caste:	Sub Caste (with Ser	ial No.):			
Special Category (Please Tick the Right Mark):					
Visually Impaired/Hearing Impaired/Orthopedically Handicapped/Mentally Retard					
Other Special Category: NCC	C/NSS/SPORTS/EX-S	ervice/CAP			

Admission Number:					
Roll Number:					
Date of Joining the Course: (DD/MM/YYYY)					
Permanent Address (All fields are Compulsory):	L	ocal Ref. /Guardian Name:			
H.No.	Н	.No.			
Flat No.	Fl	Flat No.			
Road No.	R	Road No.			
Streat Name/Village:	St	Streat Name/Village:			
Mandal:	M	Mandal:			
District:	D	istrict:			
PIN Code:	Pl	IN Code:			
Phone:	Pl	ione:			
E-mail ID:					
Identification Marks (Two Co	ompulsory):				
1.					
2.					
SSC Examination Details:					
SSC Regd No.					
Type of Pass: AP Regular/AP Sup	pplementary/CBS	E/Any Other Board			
Maximum Marks:	Secured Marks:	Division/ Grade:			
Year of Pass (Month & Year):					
Ed CET Details:					
Ed CET H T No.	Ed CET Rank:	Subject:			
Methodology 1:	Methodology 2:				

Qualifying Examination Details:										
Qualifying	Exam:]	Hall Ticket No.		Gre	Group:				
Passed (Month & Year): Second Language:										
Maximum	Marks:	Marks Secured: Division/Grade:								
Bank Details:										
Bank-Brar	nch:	Bank A/c No.								
Other Qualifications (Starting from SSC):										
Name of the Institution	University/ Board	Roll. No	Optional	Period of the Study	Year of Pass	Secured Marks	Max. Marks	Division /Grade		
<u>Declaration</u>										
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	etion against r nen I will be s	-					stitution of	n		
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Date:					Sig	nature of th	e student			
Place:										

Name

of the

Exam

Name of the Mentor:

Phone No.

CHECK LIST

<u>Note:</u> Submit **Two Sets of Xerox Copies** of the following **to the college** and **One Set of Xerox Copy with you.** The college will not give any certificate during the course.

- 1. Ed CET Hall Ticket
- 2. Ed CET Rank Card
- 3. SSC Memorandum of Marks
- 4. Intermediate Memorandum of Marks
- 5. Degree OD (Original Degree/OD Receipt/Provisional)
 - (Note: 1. Provisional Certificate is valid only 6 Months)
- 6. Degree Memorandum of Marks
- 7. Migration Certificate **Original** (Other than OU Students)

(**Note:** *Check the TC which was submitted at the Ed CET*)

- 8. Caste Certificate
- 9. Income Certificate (*Latest Three Months Before*)
- 10. Ration card
- 11. Gap Certificate
- 12. Distance Certificate
- 13. Rs. 10 Non-Judicial Stamp
- 14. 10 Passport Size Color Photo Graphs 5 Stamp Size Color Photo Graphs

Admitted Not Admitted

PRINCIPAL