



MAHATMA GANDHI VIDYA PEETHA TRUST
Dayananda Sagar Business Academy

B.M. Kaval, Kanakapura Main Road, Bangalore - 560 082.

Phone & Fax : 080 - 28432909

**Application for Admission to
Bachelor Degree in BBM / B.Com / B.C.A.**

Application No. _____

1. Name of the Candidate (As in SSLC Marks Card)
2. Date of BirthAge.....
3. (a) Sex Male Female 3 (b) Marital Status : Married/Unmarried
4. Permanent address of father / guardian for Correspondence
- Telephone Number
- Email ID
5. Local Postal Address
- of the candidate and
- Telephone Number

Affix your
Recent Photo

6. Particulars of parents / guardian:

Name	Relationship	Occupation	Annual Income

7. Education Qualification - (Plus - II / Intermediate / PUC / SSLC / SSC / HSC / 10th Std.)

Course / Examination Passed	Name of the Institution	Place	Year	Board / University	Class	%	Subjects Studied

8. Nationality and other particulars :

Home Town or Village	Taluk	District Pin Code	State	Country	Mother Tongue	Languages Known	Other Details
							Religion : Caste : Nationality

9. Marks Card / TC / Photocopies (Marks () whichever applicable)

SSLC Marks Card	PUC Marks Card	Any other Marks Card	Migration	Study	Conduct	TC	Affidavit	Caste	Eligibility
1	2	3	4	5	6	7	8	9	10

10. Medium of Instruction in School /College

11. Proficiency in sports, games or extra curricular activities, if any

DECLARATION BY THE APPLICANT

1. If admitted I promise to abide by the Rules and Regulations of the Institute and maintain decorum decency and discipline throughout my stay at all times both inside and outside the college.
2. I shall pay the prescribed fees and understand that fees once paid by me is not returnable under any circumstances.
3. I understand that the final allotment of the course vests entirely with the management of the trust.
4. I shall attend all the lectures, practical classes and tests regularly and will complete all assignments in time as expected and demanded from me by the authorities. If I am in short of attendance as per the University rules, I fully understand that I will not be allowed to write university examinations.
5. I declare that I am Physically fit to undergo and complete to take the said course and understand that any temporary illness is no excuse for fulfilling norms of class attendance, practicals and various assignments etc. that will be part of the course. I will not be absent myself from any of the activities of the course without bonafide cause at any time during my entire course period.
6. I understand that association with any organization of any nature is strictly forbidden. I will not do anything or indulge directly or indirectly with any act. person or organization which jeopardizes the interest or sanctity of the college / Trust / Society / Association in any way including ragging.
7. I fully understand that in the event of any such incidents, warranting my explanations, the decision of the management is final and totally binding on me.
8. All the facts mentioned in this application are true and correct to the best of my knowledge and I understand fully that I am liable to be punished if facts are found untrue and incorrect and my admission will summarily be rejected leading to my removal from the college later at any time and forfeiture of all fees/deposits.
9. I UNDERSTAND THAT MY ADMISSION IS ONLY PROVISIONAL PENDING FINAL APPROVAL BY THE BANGALORE UNIVERSITY I SHALL PRODUCE ALL THE NECESSARY CERTIFICATES AS REQUIRED BY THE BANGALORE UNIVERSITY WELL INTIME FOR EARLY CONFIRMATION OF MY ADMISSION.
10. I AGREE TO TAKE INTERNSHIP ASSIGNMENT WITHOUT ANY FINANCIAL REWARDS LIKE REMUNERATION, HONORARIUM, STIPEND, ETC., DURING THE COURSE.

DECLARATION BY THE STUDENT

I hereby declare that the information given above is complete and accurate to the best of my knowledge I understand that any misrepresentation may void my application or result in dismissal in the event of my securing admission, I agree to abide by the Rules and Regulations of the college and Bangalore University

Signature of the student

Date :

DECLARATION BY THE PARENT / GUARDIAN

I have gone through the particulars filled above and the declaration signed by my son / daughter / ward. If my son / daughter / ward is admitted in your institution, I undertake the responsibility for the payment of all his / her dues, if any to the institution

Signature of the parent / guardian

Date :