

## **FULLINFAWS DEGREE COLLEGE**

Managed by Lawrence Fullinfaw Memorial Trust (Affiliated to Bangalore University and Recognized by Govt. of Karnataka) Akshaya Nagar, Yellenahalli Main Road, Begur Post, Off Bannerghatta Road Bangalore – 560 068

Contact Nos: 9886937268 | 9886607041 | 8073143925

Visit us at www.fullinfawscollege.edu.in Email: principalxs.fdc@gmail.com Affix 6 Passport size photos

Application No.:																											
Name of the Applica	ınt (	Full	Nan	ne in	Cap	ital	L€	ette	rs a	s m	enti	one	ed ii	n S.	S.L	C	re	cor	d o	r equ	ıiv	ale	nt	cert	ific	ate)	) 
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Sex : Male / Female (Plea	ise Ti	ck)								A	Aadl	ıaaı	No	).:													
Date of Birth (in Figures	)									(	In w	orc	ls)	••••		••••			••••		••••	••••			••••		
Place of Birth										S	tate	;															
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Caste Certificate No.	Ι										ome rtific		No.	. :													
Permanent Residential Address: (Present Residential Address)																											
City					P	Pince	ode	:						Pł	one	e											
Father's Name										N	10th	er's	Na	me													
Father's Aadhaar No.										N	10th	er's	Aa	dhaa	ar N	lo.											
Father's Occupation										N	1oth	er's	Oc	cupa	atio	n											
Annual Income Rs.										A	nnu	al I	ncoı	me ]	Rs.												
2. APPLICANT COURSE DETAILS																											
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Combination which the applicant wishes to join (Please tick your choice)		egula	ars	Wo			R	egu	egulars Working Regulars							s	HEP JPSc.E JPs						sy.E				
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Applying for a sea under which quota				cademic scellence					enei Aeri		1			Sports Quota						nagement Quota			SC/ST/OE Quota				3C
Institution last attended																											
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## 3. PARTICULARS OF QUALIFYING EXAMINATION

Particulars of Qualifying examination passed  a) Name of the Exam  b) University or Board														_																
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c) State											d) C	oun	try								$\perp$	$\perp$	丄	$\perp$	$\perp$					
e) Reg.No.											f) Month & year																			
g) No. of Attempts											h) Class Obtained																			
	DETAILS OF MARKS SCORED IN THE O													YII	NG	E	ΧA	MI	NA	TIC	ON									
SUBJECTS											MAX MARKS										MARKS OBTAINED									
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CTS	1																													
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COF	<b>8</b> 0 4																													
	TOTAL																													
4. APPLICANT BANK DETAILS																														
1. Ba	ank Name:																													
2. Bank Account No																														
3. Bank A/c Type: Savings / Current Bank									ınk E	Branc	h																			
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	I will abide by a times.																	•												
·2.	I will obtain in a Semester Exams	s).																						`						
·3.	·3. I will secure minimum passing marks in all subjects in all the internal examinations conducted by the Institution and University.														ıd															
·4. I will always uphold the ideals of the college and my conduct at all times.																														
•5. I will pay all the Fees due in the time frame mentioned by the Office.														4.																
The Principal has the rights to detain me from appearing for any and all examinations conducted by the Institution and University (including the Final Examination) and rusticate/expel me from the institution – if I fail to abide by any of the Rules and														ıd																
Reg	Regulations laid down by the Institution, Principal, Staff and Management and fail to follow the conditions mentioned above.  Please Note: Fees once paid is not refundable and is not Transferable.														e.															
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Signature of the Student:  Contact No of Parent / Guardian											Signature of the Guardian  Principal's Signature													-						
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Administrator Principal Management