



**C. COMMUNITY CERTIFICATE DETAILS**

Community : .....  
Certificate No. : .....  
Issued by : .....  
Taluk : .....  
Date : .....

**D. DOCUMENTS TO BE PRODUCED AT THE TIME OF ADMISSION**

1. Transfer Certificate from the institution last studied - Original + 4 Photo copies
2. HSC / Pre Degree /AISSCE / ISCE / Inter mediate or equivalent Mark Statements(s) Original+ 4 Photo copies
3. Eligibility Certificate obtained from the Tamil Nadu Dr. MGR Medical University, Chennai (for students who have passed their Qualifying Examination other than HSC Course Tamilnadu) - Original + 4 Photo copies
4. Migration Certificate from the students who have passed from CBSE, ISCE & pre Degree course.
5. Community Certificate - Original + 4 photo copies
6. Passport size Photographs 5 Copies
7. Copies of passport and VISA for NRI / Foreign Nationals
8. Blood group Certificate - Original
9. Medical Fitness Certificate - Original
10. Nativity Certificate - Original
11. First Graduate Certificate (Scholarship Request)

**FOR OFFICE USE ONLY**

1. Date of Receipt :
2. Registration Number :
3. Date of Admission :
4. Course to which admitted :
5. Remarks

## **JOINT DECLARATION BY THE PARENT / GUARDIAN OF THE CANDIDATE**

I, ..... C/o .....  
(Name of the Parent /Guardian) (Name of the Students & Course)

hereby solemnly and sincerely affirm

1. That the statement made and information furnished in my son's / daughter's / ward's application as also in all the enclosures thereto submitted by him / her are true. My son/daughter/ward has been admitted in the college during the current academic year based on the documents / mark sheets / NRI\* documents submitted by me in full as required by The Tamil Nadu Dr. MGR Medical University / Department of Medical Education (DME), are true / genuine to the best of my knowledge. Should it however be found at a later date that any information / documents / mark sheets / NRI\* documents furnished is untrue I realize verified by the University / Authorities concerned and proved that they are bogus, I fully undertake to accept the entire responsibility for the damages and fully indemnify Sree Abirami College of Physiotherapy and the affiliating University / DME from the process of legal suits and other proceedings for any relief, damages and compensation arising out of such unauthorized and illegal submission of information and documents for seeking admission.
2. That my son/daughter/ward would confirm strictly to all rules and regulations in force now or which may be introduced in the institution hereafter and that I realize that breach of discipline and rules on the part of my son / daughter/ward would / lead to forfeiture of his / her seat in the institution, summarily.
3. That I am aware that if my son / daughter/ward does not put (i) the minimum percentage attendance stipulated by the University during the year (ii) Satisfactory progress and (iii) Satisfactory conduct, my son / daughter/ward will not be sent for the University/Board of Examination.
4. That I am aware that if my son/daughter/ward does not get minimum of 50 percent of marks in the day today valuation of his/ her work he/she will not be sent up for the University/Board of Examination.
5. That I am aware that the curriculum for the various courses is not rigid and that my son/daughter/ward will follow the syllabi for various courses in force at the time of his / her admission and that any revision or modification made in the syllabi during the course of his/her study in the institution will be binding on him/her.
6. That in case of my son's / daughter's / ward's progress in studies is uniformly poor in the institution his / her studies are liable to be terminated by the issue of Transfer Certificate.
7. That I am aware that if my son/daughter/ward is admitted into the hostel he/she will strictly abide by the rules and regulations in force in the hostel and that any breach of discipline or rules or any unruly conduct or undesirable activities will be summarily dealt with by forfeiture of seat both in the hostel and in the Institution in addition to such other proceedings that may be taken against him / her. I hereby authorize and permit my son / daughter / ward to take permission from the class advisor / HOD / Principal and the Hostel warden / Deputy warden before proceeding out of the hostel/college either on permission or on leave, during the entire period of his / her stay in the hostel/study in the college.
8. That I know fully well that the fees paid by me for admitting my son/daughter/ward in the institution in the First year/ Second year and for subsequent years is non refundable. I assure the management that I will not seek refund (legally or by any other means) of any of the fees paid by me at the time of admission or later of my son / daughter / ward even if he / she happens to discontinue the course, at any time. I also agree to pay any loss / compensation as determined by the Institution on account of my son / daughter/ward discontinuing his/ her studies in the middle of the course.

**\* Required for NRI Candidates only.**

9. I am fully aware of the tuition fee and other applicable fees amount currently payable by me for each semester / term / year for my son / daughter / ward for the course for which my son / daughter / ward has been admitted in the current academic year. I hereby undertake to accept and pay any revision in the fees structure which may be announced by the college due to certain Government / other certified Agencies regulation during the entire period of my son / daughter / ward study in the college. I undertake to pay the tuition fee and other applicable fees within the due date fixed by the college. I also undertake to pay the late fee/fine as determined by the college, if fail to pay the said fees within the due date.
10. That I hereby undertake that my son / daughter / ward will not indulge / participate / abet in the acts of ragging / eve- teasing etc., in any manner or form either within the premises of the college or outside the college or inside the hostel during his/ her academic career. I and my son / daughter / ward are fully aware of the rules and regulations of the college and the recent legislation passed by the Government of Tamil Nadu and the existing ruling on this subject given by Government of India. My son / daughter/ ward will abide by the action taken against him / her if he / she is found / suspected / reported to have taken part in the act of ragging / eve-teasing and he / she will not make any appeal to reconsider the decision and will accept the same.
11. I am also aware that the college will take utmost care of my son / daughter / ward during the extra-curricular / co-curricular activities. Nevertheless in the event of any unfortunate / untoward incident / accident / happening affecting my son / daughter / ward during such activities, or any of her activity within or outside the college campus, I will not hold the principal / Management/ College / staff responsible in any manner what so ever. My son I daughter/ward and I will be solely responsible for his / her activities within and outside the college campus, during the entire period of his / her study in this college.
12. I shall acknowledge my son's / daughter's / ward's periodic progress report / special report, sent in personally / telephonically / by post by the college and will take the required steps promptly. I shall also promptly respond if called for any special meeting with the Principal/Management in the interest of my son /daughter / ward and will act as per the advice of the Principal/Management unconditionally during the entire period of his / her study in this college.

I have read and fully understood all the above conditions in the joint declaration and agree to abide by the same

Signature of the Parent / Guardian :

Name of the Parent / Guardian :

I have read and fully understood  
all the above conditions in the joint  
declaration and agree to abide  
by the same Signature of the  
Student

Name of the Student :

Place : Coimbatore

Date :



# SREE ABIRAMI COLLEGE OF PHYSIOTHERAPY

(A Unit of Sree Abirami Charitable Trust)

Machegoundanpalayam, Seerapalayam Village, Eachanari Post, Coimbatore - 641 021.

Phone : 0422-2930294, 80125 72999

## STUDENT INFORMATION

Course : \_\_\_\_\_

Student Name : \_\_\_\_\_

Gender (M / F) : \_\_\_\_\_

Date of Birth : \_\_\_\_\_

Nationality : \_\_\_\_\_

Religion : \_\_\_\_\_

Community : OBC / BC / MBC / SC / ST / Others

Caste : \_\_\_\_\_

Permanent Address : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

District : \_\_\_\_\_

State : \_\_\_\_\_

Country : \_\_\_\_\_

Pin Code : \_\_\_\_\_

## CONTACT NUMBER

Father's No. : \_\_\_\_\_

Mother's No. : \_\_\_\_\_

Land Line No. : (With STD Code)

**PARENT INFORMATION**

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Father's Name : \_\_\_\_\_

Qualification : \_\_\_\_\_

Occupation : \_\_\_\_\_

Annual Income : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Qualification : \_\_\_\_\_

Occupation : \_\_\_\_\_

Annual Income : \_\_\_\_\_

**FOR IDENTITY CARD**

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Name : \_\_\_\_\_

Blood Group : \_\_\_\_\_

DOB : \_\_\_\_\_

Contact Number : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_

District : \_\_\_\_\_

State : \_\_\_\_\_

Pin Code : \_\_\_\_\_

Middle of the Box

Signature



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Phone : 0422-2930294, 80125 72999

No. :

Year :

## STUDENT'S HOSTEL APPLICATION FORM

1. Name (in BLOCK Letters) : \_\_\_\_\_

2. Date of Birth and Age : \_\_\_\_\_

3. Course : \_\_\_\_\_

4. Blood Group : \_\_\_\_\_

5. Name of the Father / Guardian : \_\_\_\_\_

6. Permanent Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mobile No. : \_\_\_\_\_ Phone (with STD Code) : \_\_\_\_\_

7. Address of the Local Guardian : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mobile No. : \_\_\_\_\_ Phone (with STD Code) : \_\_\_\_\_

8. Address for Communication : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mobile No. : \_\_\_\_\_ Phone (with STD Code) : \_\_\_\_\_

9. Other Emergency Phone No. / Mobile No. \_\_\_\_\_

10. Preference of Food : Veg. / Non-Veg.

### FOR OFFICE USE ONLY

Admitted to the Hostel on : \_\_\_\_\_

Payment Details : \_\_\_\_\_ Amount : \_\_\_\_\_

Receipt No. : \_\_\_\_\_ Date : \_\_\_\_\_

Signature of the Warden

9. Name of the Visitor &  
The Relationship with this  
student Address.

1.

2.

3.

4.

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**DECLARATION**

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I \_\_\_\_\_ the undersigned, student of \_\_\_\_\_ Course do hereby agree to confirm from this date, to the rules and regulations including those relating to the college / hostel laid down there after by the management / Principal of the college for the due maintenance of discipline. Also I have understood the Rules and Regulations relating to the College / Hostel and promise to abide by the same and also the decisions of the authorities in the matter of enforcing the same. I also agree that I will not join any agitation or any strike during my study /the period of service.

I hereby declare that all particulars given above are true and I will abide by the rules and regulations of the Hostel.

Date :

Parent's / Guardian's Signature

Signature of the Applicant