



Dr. MGR-Janaki College of Arts & Science for Women
(Affiliated to the University of Madras)
"Sathyabama MGR Maligai", Chennai 600028
Email: admin@mgrjanaki.ac.in

Application for Admission	No.	Affix Recent Passport Size Photograph
M.Sc. Applied Microbiology		
Reg. No: _____ Date : _____		

1. Name of Applicant											
2. Date of Birth											
3. Community											
4. Nationality											
5. Mother Tongue											
6. Residential Address											
Phone Number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
7. Name of Father with occupation and office address & phone number											
8. Name of Mother with occupation and office address & phone number											
9. Annual Income											
10. Name of Qualifying Exam											

11. University/College	
12. Total Percentage of Marks Secured	
13. Work Experience if Any	
14. Extra Curricular Activities	
15. Physically Disability if any	

Declaration: I declare that the above information is true. I also agree to abide by all the decisions taken by the Principal in all matters and fees paid once will not be refunded under any circumstances.

Signature of Parent

Signature of Student

Place:

Date:

Attach copies of

1. UG Degree mark sheets/consolidated mark sheet, Provisional Degree Certificate
2. Copy of Attested Community Certificate
3. Copy of Income Certificate (in the case of SC/ST/Christian Adidravidar candidates only)
4. Medical Fitness Certificate
5. Self Addressed Stamped Envelope