APPLICATION NUMBER

SOA







SCHOOL OF ARCHITECTURE MOOKAMBIKA TECHNICAL CAMPUS

(APPROVED BY COA, NEW DELHI & AFFILIATED TO M.G.UNIVERSITY, KOTTAYAM)
A Hi-Tech Architectural College with a difference
ETTAPPILLY, MANNATHUR, MUVATTUPUZHA, ERNAKULAM DIST
PH: 0485 2876300, 2877415

Email: mail.mookambika@gmail.com,soamtc@gmail.com, Website: www.soamtc.org



APPLICATION FOR ADMISSION TO B. ARCH DEGREE COURSE 2017-18

1.	(Block Letters)	L				
2.	NATA - Year of Appearance	ce	Valid Score			Please affix your self attested
	Roll No):				passport size
3.	ABSTRACT OF THE MA (Please attach an attested cop		amination))			ρποιο
4.	Reg. No of PLUS TWO E	XAM	No. of C	Chances		
5.	TOTAL % of MARKS in P	LUS TWO	% ir	n Maths		
6.	Whether belongs to SC/S	ST/SEBC, Give Details				
	Ref. Prospectus 2016 - Commissioner of Entrance Exams - Para 5.4.2. (Page 11 & 12) and annexure - IX (Page 77)					nnexure - IX (Page 77)
7.	Total Annual Income					
	If less than 4.5 lakhs per year, Income Certificate from Village Officer should be produced before admission. Please refer prospectus 2016 of Commissioner of Entrance Exams for availing the benefit of SEBC.					
8.	TC No. & Date					
9.	Name of School			Marks in	Entrance	e Evam
10	. Entrance Examinations			Part I	Par	t II Total
10	Roll No. if any					
	FOR OFFICE USE ONLY FOR RANK LIST					
11.	Rank by CEE for Architecture		PCM % Norr	malised % E	ntr. Exam	% Total %
12.	12. Whether the candidate needs *HOSTEL Accomo0dation (Hostel is with Pure Vegetarian Mess only) YES					
13	13 Whether the candidate needs COLLEGE BUS facility YES NO					

14	Name of the applicant in full (BLOCK LETTERS) as in certificate (SSLC)	:	
15.	Mother Tongue	:	
16.	Address for communication	:	
	District & State		
	Pincode		
17.	Date of Birth in Christian Era (in figures)	:	
	(in words)		
18.	Religion/Caste	:	
19.	Sex	:	M/F Blood Group
20.	Nationality	:	
21	Nativity	:	Keralite Non Keralite
22.	a) Name of Parent/Guardian	:	
	b) Relationship with the applicant		
	c) Address of Parent/Guardian &		
	Give email address, if any		
	d) Mobile No, if any	:	
	e) Phone No. Residence with STD Code	:	
	f) Phone No. Office	:	
	g) Occupation of parent	:	
	h) Official address of parent/guardian	:	

(Please atta	(Please attach an attested copy of the marklist of the 10th examination)					
Reg. No. of	f 10th Exam	1	Total % of Mark			
24. ABSTRAC	24. ABSTRACT OF THE MARKLIST PLUS TWO					
(Please atta	(Please attach an attested copy of the marklist of the Plus Two examination)					
25. Reg. No. of	25. Reg. No. of Qualifying Examination :					
26. Month & Y	26. Month & Year of Pass of Qualifying Examination					
27 Total Percentage of Marks in PLUS TWO						
28. Details of C	28. Details of Qualifying Examination : HSE/CBSE/ICSE/VHSE/Others					
If others, S	pecify					
Subject	Marks Scored in Plus Two				_	
a neg e e	In Figures	In V	Vords	Maximum Marks	Percentage of Marks	
Physics						
Chemistry						
Mathematics						
Total PCM						
I,(Candidate) hereby						
solemnly and sincerely affirm that the statements and information furnished above and in the enclosures						
sumitted by me are true to the best of my knowledge. I am aware that my admission will be cancelled and						
I shall be liable for criminal prosecution if any of the infor5mation is found to be false.						
Signature of the Parent/Guardian Signature of the Applie						Applicant
Place:						
Date:						

23 ABSTRACT OF 10TH MARKLIST

EXTRA CARRICULAR ACTIVITIES

1. National Level Participation/Certification	ates
2. State Level Participation/Certificates	
3. District Level Participation/Certifica	tes
4. Other fields of Proficiency	
Campus, myself along with my parents here political activities inside the campus nor per not arrange or attend meetings of any natural further declare that I will not bring any modern to the campus of the campus	DECLARATION itted in School of Architecture, Mookambika Technical eby solemnly declare that I will neither indulge in any suade others to such activities. I also declare that I will re that are not permitted by the College Authorities. I bile phone / Ipod or any similar devices in the college in any act of harassment or ragging on any other student eeds throughout my student career.
Date:	Signature of the Applicant
college and which will undermine the discip	ulge in any act which is detrimental to the interest of the bline. In case any of the above condition is violated, I ed from the college or is liable to taken appropriate
Date :	Signature of the Parent/Guardian
Office use only	