SRM INSTITUTE OF SCIENCE & TECHNOLOGY
(Deemed to be University u/s 3 of UGC Act, 1956)

DISTANCE EDUCATION APPLICATION FORM - 2019
APPLICATION NO:

Paste Your Recent Passport Size Photograph Here

Basic Details:	
Are you currently a resident of Tamil Nadu?	

Preferences Details:	
Program Label	**Course Preference**
☐UG ☐PG ☐DIPLOMA	

Personal Details:

Name	
Mobile No.	
Email Id	
Date Of Birth	
Gender	
Alternate Email Address	
Nationality	
Blood Group	
Social Status	
Are You Differently Abled?	
Nature of Deformity	
Percentage of Deformity	

Family Details:

	Father	Mother
Name		
Mobile Number		
Email Address		
Occupation		
Designation		

Professional Experience (Start From The Present Employer)

Do you have any Work Experience? : NO

Name of Employee: | Address Of Employee: | Salary received /Month :

	Organisation's Name	Designation	Nature of job	Total Salary /Month	From Year	To Year	Work Experience(In Months)
1.							
2.							
3.							
Total Work Experience In Months							

Address Details:

	Communication Address
Address	
Country Name	
State Name	
District Name	
City Name	
Pin Code	

Educational Details:

Current Education Qualification Status:

	SSC Details (10th)	HSC Details (12th) :	Graduation Details
Institute			
Board			
Scheme			
Percentage / CGPA			
Year Of Passing			
Registration number			
Stream	-		-
Degree	-	-	

Declaration

I certify that the information submitted by me in support of this application is true to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my admission is liable to be rejected/canceled at any stage of the program. I undertake to abide by the disciplinary rules and regulations of theinstitute.