

RECORD OF PERFORMANCE AT THE PLUS 2 OR EQUIVALENT EXAMINATION

| Subject | Marks obtained | | Minimum Marks | Maximum Marks |
|---------------------|----------------|----------|---------------|---------------|
| | In Figures | In words | | |
| Part I English | | | | |
| Part II (Language) | | | | |
| Part III (Optional) | | | | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| Total for Part III | | | | |
| Grand Total | | | | |

LANGUAGES KNOWN :

MOTHER TONGUE :

DECLARATION

I Hereby declare that the information furnished above is true to the best of my knowledge and belief. I understand that giving false or incomplete information may lead to the refusal of my application or cancellation of enrolment. I also understand that my admission is under the rules and regulations of Calicut University.

DATE: SIGNATURE OF APPLICANT

PLACE: SIGNATURE OF PARENT / GUARDIAN

Application form dully filled in with photocopies of Certificates and

2 pass port size colour photographs should be sent to

The Director / Principal, ICNAS, International College for New Age Studies

IIInd Floor, K.T.Complex, Jail Road, Calicut -4

Ph: 0495 - 3242030, 3241990

E-mail : principal@icnas.com

web: www.icnas.com

FOR OFFICE USE ONLY

| Admission No/Regd.No | Date of Admission | Class | Marks | General Merit |
|----------------------|-------------------|-------|------------------|------------------------------|
| | | | Plus Two English | Reservation Management Quota |