List of documents to be submitted at the time of admission(*)

1. S.S.L.C.Mark list Original

2. Two attested copies of S.S.L.C.Mark list

4. Two attested copies of Plus Two mark list

5. Pass certificate of Plus Two mark list

6. Transfer Certificate Original

7. Conduct Certificate Original

8. NATA Score Card

9. Alliament Memo

10. Physical Fitness Certificate issued by a Government Doctor

11. Income Certificate Of applicable)

12. Caste Certificate (If applicable)

13. Copy of the receipt issued by the beat



I E S COLLEGE OF ARCHITECTURE

CHITTILAPPILLY P.O., THRISSUR, 680551. Ph: 0487-2309708. Fax No: 0487-2307077. Website: www.iesca.in, E-mail ID: iescatcr@gmail.com,info@iesca.in Affix your passport size photograph

APPLICATION FORM FOR ADMISSION TO B.ARCH DEGREE COURSE UNDER MANAGEMENT QUOTA ACADEMIC YEAR 2019-20

(Fill in the blanks in block letters or put tick($\sqrt{}$) wherever applicable)

I. Name of Applic	cant									
							App	l. No.	21	
2. Male		3. Blood (Group	4.1	Email id					
Female										
. Quota under wl	hich admitted	Managemen	t/ NRI/		6. Mob	oile No				
7. No., Date	of the T.C &		No:			Date	•			
Name of the School			School: Place:							
8. NATA R	egister No, & NA	TA Score/200	Roll.No	VARUNAUV	METES.	N	ATA MAI	RKS/200		
9. Date of B	irth		Place of Birth							
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11 . Nativity			Mother Tong							
12. Details of	Parents			Occupatio	n of Parent	and Nan	ne of firm			
Name:	•••••			••						
Permanent A	ddress:	•••••	•••••	··· Office	with STD Code	e) 1	Residen	ce (With	STD Code	
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5 .Any Scholarship Enjoyed if yes, furnish details	OLLEGE OF AR				
5. Name of Institution and Course l		THORUGE WHO SHEET AND SHEET			
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plicable)	clock letters or put field (V) wherever	(Fill in the blanks in l Same of Applicant			
7. Prizes and Awards secured in ex	curricular activities in school/o	college level			
Sillinoi Lk	J. Blood Croups	Female			
		7. No., Date of the T.C.A.			
1 99871	2 toosise				
B. DETAILS OF PARENTS / GUA					
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obile No.	Mone 1 to (with 512 code)				
mail id :					
Name of Mother	2	Permanent Address:			
Occupation of Mother & Name of Firm	SM				
Office(with STD Code)	Residence (with STD code)	Mobile			
		13. Details of Qualifying I xamin			
9. Details of Local Guardian if any	Name & Address)	07.989			
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telationship with student	Occupation of Gua	ardian			

Signature of the Parent/ Guardian

Signature of the Student

Place:

Date:

FOR OFFICE USE ONLY

List of documents to be submitted at the time of admission(✓)

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6.	Transfer Certificate- Original
7.	Conduct Certificate- Original
8.	NATA Score Card
9.	Allotment Memo
10.	Physical Fitness Certificate issued by a Government Doctor
11.	Income Certificate-(If applicable)
12.	Caste Certificate (If applicable)
13.	Copy of the receipt issued by the bank
14.	5 Passport size photographs