Cost of Application form Rs.50/-

SJCM/CE/F001/2025

ST JOSEPH'S COLLEGE MOOLAMATTOM AUTONOMOUS

APPLICATION FOR REGISTRATION TO THE SJC-UGP(HONOURS) EXAMINATIONS(BA., BSc, ,B.Com)

FIRST SEMESTER EXAMINATION NOVEMBER 2025

Permanent Register Number:		
APAAR Number:		
Name of Candidate:		
Name of Programme:	Aided/SF	
Date of Birth (DD/MM/YY):	Gender:	
Address for communication with phone number And Email:		
*Whether Eligible for Fee concession:	☐ Yes ☐ No	If Yes, State Category: Signature of the Principal:
*State whether there is Sufficient Attendance for each course:	☐ Yes ☐ No	If No, State whether applied for Condonation: ☐ Yes ☐ No Signature of the Principal:

Details of Courses

Course Code & Title	T	P	Whether Registering for exam	Remark
			☐ Yes ☐ No **	
			☐ Yes ☐ No **	
			☐ Yes ☐ No **	
			☐ Yes ☐ No **	
			☐ Yes ☐ No **	
			☐ Yes ☐ No **	

**If No, specify in the Remark column whether the course is an Audit Course or if the student is a Slow Learner

Signature of the Candidate:	**Signature of the Head of the Department:**

*Should be recommended by the Principal

Place:

Date:

Signature of the Principal with office seal