



SSM COLLEGE OF ENGINEERING

(Sponsored by SSM Foundation Trust for Educational and Social Development)

Approved by AICTE, New Delhi. F.No.730-52-325(E)/ET/98 & Affiliated to Anna University of Technology, Coimbatore.
NBA Accredited & ISO 9001 : 2008 Certified Institution.



NH-47, Salem Main Road, **KOMARAPALAYAM - 638 183.** Tamilnadu. India.

Phone : 04288 - 267703, 294020 ; Fax : 04288-267247

E-mail : enquiries@ssmce.ac.in ; Website : www.ssmce.ac.in

UG APPLICATION FORM

NAME OF THE COURSE :

BRANCH APPLIED FOR :

1. Name in BLOCK Letters :
2. Name of the Parent / Guardian :
3. Photo of the Candidate
4. Occupation of the Parent :
5. Annual Income :
6. Permanent Address :

Space for
affixing
recent passport
size photograph

- Phone / E-mail :
7. Local Guardian Address :
 - Phone / E-mail :
 8. Date of Birth :
 9. Sex : Male / Female / Transgender
 10. Nationality :
 11. Religion :
 12. Community :
 14. Mother Tongue :
 15. School Studied / Place :

15. School Studied / Place :

Sl. No.	Class	Year of Passing	% Mark	Board of Examination	Name of the Institution	
(1)	10 th Std					
(2)	12 th Std					
	Maths	Physics	Chemistry	Vocational Theory	Voc. Practical I & II	Average
Max. Marks						
Marks Secured						
(3) Diploma						
	Percentage in Pre-Final Semester			Final Semester		Average

16. Whether hostel accomodation required : Yes / No

17. Qualifying Examination : HSC / ISE / CBSE / Others (Specify)

18. Medium of Instruction : English / Others (Specify)

DECLARATION BY THE APPLICANT

I, (Name in full) Son / Daughter

of hereby solemnly declare that the information furnished and the statements given in the application and the enclosures are true, correct and complete. I further declare that should it be found otherwise, I will be liable to forfeit my seat and / or removal from the rolls of the Institution at whatever stage of study I may be, besides making me liable for criminal prosecution. I will not claim for refund of fees paid. Also, I am aware of institution's approach towards 'Ragging' and the punishment to which I shall be liable if found guilty of 'Ragging'.

Place :

Date : Signature of the Applicant

DECLARATION BY THE APPLICANT'S FATHER / GUARDIAN

I, (Name in full) Father / Guardian of

..... hereby solemnly declare that I am fully aware of the declaration made by the applicant, my Son / Daughter / Ward and bind myself on the same terms contained in the above declaration. If it is found that my Son / Daughter / Ward violates the above said declaration he/she will be liable to forfeit the admission and I promise that I will not claim any compensation or refund of fees paid by us. Also I accept that any amount paid by us is non-refundable after the admission. I am ready to pay the full fees of the course if my Son / Daughter / Ward wishes to leave the institution in the middle of the course. Also, I am aware of institution's approach towards 'Ragging' and the punishment to which I shall be liable if found guilty of 'Ragging'.

Place :

Date : Signature of the Father / Guardian

Note : Guardian can execute the above declaration only if both the parents are not alive.

Enclosed Herewith : (Attested Photo Copies - 2 sets)

1. Statement of Result / Degree Certificate / Provisional Certificate
2. Statement of Marks of the qualifying examination
3. CET Hall Ticket / CET Score Card
4. Transfer Certificate / Migration Certificate
5. Passport Copy (International Students only)