Δnnl	ication	No.



APPLICATION FORM - MCA 201 - 201

Full N	lame	[in Block Le	tters]	:							
Age and Date of Birth			:								
Father's Name			:								
Religion				:							
Community				: OC							
Address for Communication :				:							
Phone Number			:eMail ID :								
Qualification :											
Degre	ee	Branch	Institut	ion		ı	Boa	ard / University	Year of passing	% of	Marks
SSLC											
+2											
UG											
Qualifying entrance exam TANCET / CET score : What do you plan to specialize?											
1		ogramming				4		Database Administration			
2		etworking				5		Multimedia			
3	So	oftware Testing				6		MBA *			
* Onlir	ne MBA	approved by Bl	harathiar	University							
I, here by assure you that the information furnished above are true to the best of my knowledge.											
Date: Signature of the Applicant											

Filled in application to be sent to:

Admission Office

KGiSL Institute of Information Management

KGiSL Campus, Saravanampatti, Coimbatore - 641 035.

🖀 : 0422 - 6619935 🛮 🛎 : admissions@kgisliim.ac.in 🎕 : www.kgisliim.ac.in