APPLICATION FORM

UNITY Academy of Education
explore life

UNITY College of Physiotherapy

APPLICATION No.

PHOTOGRAPH

Paste your recent passport size color photograph not older than 3 months. Do not pin or staple

APPLICATION FOR ADMISSION TO:

- **BACHELOR OF PHYSIOTHERAPY**

Fill the form in English using CAPITAL letters

FOR OFFICE USE ONLY

Registration No.....Admit to ..... Fees Paid .....

....

cashier Principal

NAME OF APPLICANT (AS PER SSLC CERTIFICATE)

DATE OF BIRTH DATE MONTH YEAR

GENDER MALE FEMALE

BLOOD GROUP

NATIONALITY

MOBILE NUMBER

AADHAR NUMBER

WHATSAPP NUMBER

E-MAIL ADDRESS

STUDENT,S ADDRESS FOR CORRESPONDENCE

NAME OF PARENT / GUARDIAN

OCCUPATION OF PARENT / GUARDIAN

RELATION WITH PARENT / GUARDIAN

PARENT / GUARDIAN'S ADDRESS

ISD / STD CODE

TELEPHONE NUMBER (O)

TELEPHONE NUMBER (R)

MOBILE NUMBER

E-MAIL ADDRESS

ISD / STD CODE

TELEPHONE NUMBER (O)

MOBILE NUMBER

NAME AND ADDRESS OF LOCAL GUARDIAN (IF ANY)

ISD \ STD CODE

TELEPHONE NUMBER

MOBILE NUMBER

ACADEMIC PARTICULARS

Exams Passed	Name & address of the School / College	Name of Board / University	Reg. No	Percentage & Class in which passed	Attempt / Year of passing
SSLC					
PUC or Equivalent exam					
Degree or Equivalent exam					

ATTESTED PHOTOCOPIES TO BE ENCLOSED:

1. Nationality and domicile certificate, if there is change of domicile.
2. Marks card of qualifying examination. (SSLC, PUC, TC, Conduct, Medical, Migration & Eligibility Certicate. All originals to be produced at time of interview.
3. Aadhar Card copy.
4. Proof of Age (attested photocopy of SSLC-TC Certificate)
5. Draft payable in Mangalore in favour of Unity Academy of Education.
6. 5 photos (passport size).

Declaration:

I hereby state that I have filled this form myself and to the best of my knowledge and belief, the particulars given above are true.
I hereby undertake to abide by all the conditions, rules and regulations in force at present and also those which may herewith be introduced for the administration of the academy, I shall do nothing unworthy of the students of the academy either inside or outside of anything that may interfere with its orderly working and discipline. I am aware that the management has the full authority to terminate my studies for disinterest, misbehavior and continuous failures.

I hereby undertake that I shall pay all the fee and other dues to the institution promptly on demand.

Place :
Date :

.....

SIGNATURE OF PARENT / GUARDIAN

.....

SIGNATURE OF APPLICANT

UNITY
Academy of Education
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