KONGUNADU INTEGRATED COLLEGE OF EDUCATION

Velagoundampatti, Namakkal Dt. - 637 212.

ADMISSION REGISTRATION FORM FOR 2024 - 2025

B.A.B.Ed.:_____

Application No:	-					I	Oate: _			
Student Name	:									
Date of Birth	:									
Father's & Mother's Name	:									
Occupation	:									
Address	:									
Mobile No.	:									
Religion, Community & Caste	:									
Name of the School								Month ar of Pas		
Studied & Place	:									
Subject Name	:	Tamil	English					Total	%	
Marks Scored	:									
Major Preferred	:	1.		· ·	2.		3.		J	
Reference:			Signature of the Student S				Signature of the Parent PRINCIPAL			