



MACE

MUSLIM ASSOCIATION COLLEGE OF ENGINEERING

VENJARAMOODU P.O, THIRUVANANTHAPURAM, KERALA, PIN - 695 607

(Approved by AICTE and affiliated to the university of Kerala)

Tel : 0472 - 2870786, 2871786, 2875274, Fax : 0472 2875274

E-mail : principalmace@yahoo.com Website : www.macev.org

Online form



APPLICATION FOR ADMISSION TO ENGINEERING DEGREE COURSE 201.... - 201....

APPLICATION No.....

| | | |
|--|--------------------|-------------------------------------|
| Name of the candidate in full (in BLOCK letters) | | Passport size Photograph |
| Name of Parent/Guardian and relationship (in BLOCK letters) | | |
| Occupation..... | Annual Income..... | |
| Address for communication (in BLOCK letters) | | |
| Door No/House name | | |
| Area/Street/Road | | |
| Post Office | | |
| District, State and Pincode | | |
| Permanent Address of the Candidate If different from the address given above (in BLOCK letters) | | |
| Door No/House name | | |
| Area/Street/Road | | |
| Post Office | | |
| District, State and Pincode | | |
| Other contact details | | |
| Telephone (with code) | Mobile..... | |
| | | Email..... |
| Nationality | | |
| Religion and Community | | |
| Gender (Male/Female) | | |
| Date of Birth in Christian Era | | |
| | | In figures |
| | | in words |
| Branch Opted | | |
| First Choice | | |
| Second Choice | | |
| Third Choice | | |

DETAILS OF QUALIFYING EXAMINATION

(In case Marklist of the qualifying examination is not available at the time of submitting the application, it should be produced on the date specified by the office)

Examination Passed _____
 Month and Year of Passing _____
 University/Board/School _____
 Register No. _____

Plus 2 Marks

| Subjects | Marks scored | Maximum Marks | Percentage of Marks |
|---|--------------|---------------|---------------------|
| Physics | | | |
| Chemistry/Biotechnology Computer Science/Biology | | | |
| Mathematics | | | |
| Other Subjects (VHS Exam. etc.) | | | |
| | | | |
| T O T A L | | | |

DETAILS OF QUALIFYING EXAMINATION

Name of School
 District, State
 Month and Year of Passing
 Register No.

Std. X Marks

| Subjects | Marks scored | Maximum Marks | Percentage of Marks |
|----------------|--------------|---------------|---------------------|
| Physics | | | |
| Chemistry | | | |
| Mathematics | | | |
| Other Subjects | | | |
| | | | |
| | | | |
| | | | |
| Total | | | |

DETAILS OF ENTRANCE EXAMINATION

Month and Year of Passing

Register No.

Rank

| Subjects | Marks scored |
|--------------|--------------|
| Physics | |
| Chemistry | |
| Mathematics | |
| TOTAL | |

Residential status of the Candidate

Whether staying with parents Yes or No

If 'no', furnish name and address of the local guardian Name

Door No / House name

Area/Street/Road

Post Office

District, State and Pincode

Telephone (with code) Mobile.....

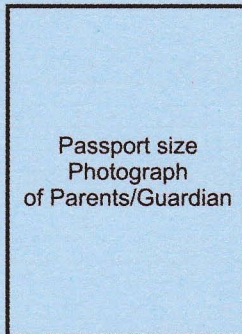
E-mail

DECLARATION

I, hereby declare that I will abide by the Rules and Regulations of the College and that I will subject myself to such disciplinary action as may be taken by the College authorities in the matter of maintaining campus discipline.

I have carefully read the Act relating to prohibition of ragging and fully understood its contents along with the details of punishment for ragging. I also understand that if I am found guilty of ragging I am liable to the punishment provided for under the statute.

Counter signature of Parent or Guardian



Passport size
Photograph
of Parents/Guardian

Signature of the Candidate

Place :

Date :

FOR OFFICE USE

Branch Admitted :

.....
Accountant

.....
Administrative Officer/ Director

.....
Principal