



St. Joseph's College
of Commerce (Autonomous)

Application No.....



Swansea University
Prifysgol Abertawe

163, Brigade Road, Bangalore- 560 025
Tel: (080) 25360644/46 Fax: (080) 25540378
www.sjcc.edu.in

Application for International Twinning Program

Name...../..... Male Female
Full Name (in **BLOCK LETTERS** as per Transfer Certificate)

Date of Birth
(Date) (Month) (Year)

Place of Birth...../...../.....
District State Nationality Religion

Telephone..... Mobile..... Email.....

Details of Parents(in BLOCK letters):

Relationship	Name	Occupation	Annual Income
Father			
Mother			
Father' Email Id		Mobile No:	
Mothers' Email Id		Mobile No:	

Student's Current Residential Address

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Guardian's Permanent ResidentialAddress

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.....

Please give details of the qualifying examinations.

	Subject	Institution/ School	Board	Year	Percentage/Grade
Std 10					
Std 11					

Note: Provisional admission will be granted subject to availability of seats, based on ranking of applicants.

<p><u>Statement of Purpose:</u> My objectives to undertake the course</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
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I hereby undertake that I will adhere to the following conditions:

- A minimum of 75% attendance in each subject during the semester
- A minimum 60% marks in the examinations conducted by the College
- Abide by the rules and regulations of the College with a good character and conduct.

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Signature of the Parent/ Guardian

.....
Signature of the Student

FOR OFFICE USE ONLY

Fees Paid:	Admitted to:
Challan No:	Date of Admission:
Certificates Due:	PRINCIPAL