

Campus Office : PERI Knowledge Park, Mannivakkam, Chennai - 600 048.

Ph: +91 91505 94111 / 91505 94222, www.peri.education

APPLICATION FOR ADMISSION

Application No :

ACADEMIC YEAR

First Year Lateral Entry Transfer Management Quota Government Quota

Please affix a
passport size
photograph

ENGINEERING

Branch applying for

B.Tech Courses

- ARTIFICIAL INTELLIGENCE & DATA SCIENCE
- INFORMATION TECHNOLOGY
- COMPUTER SCIENCE & BUSINESS SYSTEMS

M.E Courses

- APPLIED ELECTRONICS
- COMPUTER SCIENCE
- COMMUNICATION SYSTEMS
- POWER ELECTRONICS AND DRIVES

B.E Courses

- COMPUTER SCIENCE
- COMPUTER SCIENCE (CYBER SECURITY)
- COMPUTER SCIENCE
(ARTIFICIAL INTELLIGENCE AND MACHINE LEARNING)
- CIVIL
- ELECTRICAL & ELECTRONICS
- ELECTRONICS & COMMUNICATION
- MECHANICAL

SHIFT 1

ARTS & SCIENCE

SHIFT 2

Branch applying for

UG Courses

- B.Com. GENERAL
- B.Com. ACCOUNTING & FINANCE
- B.Com. COMPUTER APPLICATION
- B.Com. CORPORATE SECRETARYSHIP
- B.Sc. CHEMISTRY
- B.Sc. COMPUTER SCIENCE
- B.Sc. COMPUTER SCIENCE WITH ARTIFICIAL INTELLIGENCE
- B.Sc. COMPUTER SCIENCE WITH DATA SCIENCE
- B.Sc. VISUAL COMMUNICATION
- B.Sc. MICROBIOLOGY

- B.Sc. PSYCHOLOGY
- B.Sc. BIO-TECHNOLOGY
- B.C.A. COMPUTER APPLICATIONS
- B.A. CRIMINOLOGY & POLICE ADMINISTRATION
- B.A. TAMIL
- B.B.A. BUSINESS ADMINISTRATION

PG Courses

- M.Com. GENERAL
- M.Sc. COMPUTER SCIENCE
- M.Sc. MICROBIOLOGY

PHARMACY

Branch applying for

Courses

- B.PHARM

NURSING

Branch applying for

Courses

- B.SC. NURSING

PHYSIOTHERAPY

Branch applying for

Courses

- BPT BACHELOR OF PHYSIOTHERAPY

CANDIDATE PARTICULARS

1. Name :

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 (As in 12th Mark sheet or Equivalent) **First Name** **Middle Name** **Last Name**

2. Father's Name :

Occupation			
Annual Income			
Landline		Mobile	

3. Mother's Name :

Occupation			
Annual Income			
Landline		Mobile	

4. Address for communication :

Pincode		Phone	
Mobile			Email ID

5. Local Guardian's Name (if any) :

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6. Local Guardian's Address :

Pincode			
Mobile			Email ID

7. Gender : M F

8. Aadhar Number :

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9. Are You a Son / Daughter of Ex-Serviceman? : Yes No
 If yes give Particulars : _____

10. Date of Birth :

Day	Month	Year	

 Blood Group :

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11. Distinction in : SPORTS NCC NSS Other Activities _____

12. Nationality : _____

13. Religion : _____

14. Community : ST SC DNC MBC BC OC ADC
 Name of Community : _____

15.Mother Tongue : _____

16.Are you a Foreign National : _____
(Attach passport and Visa Details)

17. How do you know about the college : Advertisement Social Media Student Others (specify) _____

18. Are you differently abled? (Please specify) _____

ACADEMIC INFORMATION : PLUS 2 EQUIVALENT / DEGREE / DIPLOMA

Board of Examination _____ Reg. No _____ Year of Passing _____ No. of Attempts _____

School / Institution _____

Medium of Instruction : Tamil English Other Language (Please specify) _____

(Please enter the following details below)

SUBJECT		MARKS OBTAINED		MAXIMUM MARKS	
Language (Specify)					
English					
Mathematics					
Physics					
Chemistry					
Computer Science					
Biology					
Zoology					
Botany					
Business Mathematics					
Economics / Accountancy / Commerce					
Electrical / Mechanical / Civil					
Others					
Total		Percentage		Cutoff Mark	

OTHER INFORMATION

1.Extra-curricular Activities : _____

2.Hostel Accommodation Required : Yes No

3.Transport Required : Yes No

DECLARATION BY THE CANDIDATE

I _____ Son/Daughter of _____ hereby affirm that the particulars given in the application form are true, correct and complete. I further declare that should it be found otherwise, I will be liable to forfeit my seat and/or removal from the rolls of the institution at whatever stage I may be, besides making me liable for criminal prosecution. I am fully aware that, as per the direction of the Hon'ble Supreme Court of India and Tamilnadu Prohibition of Ragging Act 1997, ragging is an offence and is banned in all Institutions and anyone indulging in ragging is liable to be punished _____

Location:

Date:

Signature of the Applicant:

DECLARATION BY THE PARENT / GUARDIAN

I _____ Parent / Guardian of _____ hereby declare that all the information given herein is true and correct. I stand guarantee for the good conduct of my ward during the course of his/her study and stay in the hostel. I authorize the institution to initiate disciplinary action against my ward for violation of any of the stipulated rules and regulations. I also promise to compensate the damage that may have been caused by my ward due to his/her conduct.

Location:

Date:

Signature of the Parent:

IMPORTANT: Attested copies of the following applicable certificates should be enclosed.

1. Qualifying Examination - SSLC, HSC or Equivalent / Degree - Mark sheet - 5 copies

2. Passport Size Photograph - 6 copies

3. Transfer Certificate - 1 copy

4. First Graduate Certificate - 2 colour copies

5. Community Certificate - 5 copies

6. Physical Fitness Certificate - 2 copies

7. Migration Certificate (if applicable) - 5 copies

8. Eligibility certificate from the university (other state / foreign student) - 5 copies

Note: All original certificates/ testimonials should be produced at the time of admission.

For Office Use : Approved Not Approved

Signature of the Approving Authority

Signature of the Chief Operating Officer