

## UNIVERSITY OF KERALA

## INTER UNIVERSITY CENTRE FOR GEOSPATIAL INFORMATION SCIENCE AND TECHNOLOGY

Application for Admission to Post Graduate Diploma in Geo-Information Science and Technology ( 2024-25 batch)

Last date: 25<sup>th</sup> October 2024

Name of Applicant:		
Mode of Payment of Application DD/P and Registration fee	ay-in-slip	Affix Passport Size
Amount: DD/Pay-in-slip No.:		Photograph
DatedBank:		here
1. Name of the Inter University Centre to which application is being submitted and Name of the course (Refer prospectus)		
2. Name of Applicant (In block letters with initials last)		
3. Address to which communications are to be sent Telephone number if any E-mail address if any		
4. Permanent Address		
S. Age and date of birth (In figures and words)		
6. Sex		
7. Nationality		
8. Father's / Guardian's Name and Address		
9. Occupation and annual income of parent		

10. Name and address of Local guardian, if any Telephone number if any								
11. Have you been in receipt of any scholarship or fee concession? If so, give details								
12. Religion and Caste								
13. Are you a Matriculate of this University								
14. Institution through which Matriculated with year								
<ul><li>15. If employed, give details</li><li>(1) Organization</li><li>(ii) No. of years of experience</li></ul>								
16. Educational	Qualificati	ons						
Examination Passed	Main Subject	Class/ Rank	% of Marks	Yea pass		College/ Institution	University	
17. Any other	information	the candi	date may	wich	to a	dd		
17. Any other information the candidate may wish to add								
DECLARATION  I,								
the statements made in the application are true to the best of my knowledge and belief.								
Place: Date:						Sig	gnature of the applicant	
			For offi	ice us	se on	ly		
Date of Receipt of	application							
Date of admission	1.							
Admission No								
Remarks								