



# FATHER MULLER COLLEGE OF SPEECH AND HEARING

(A Unit of Father Muller Charitable Institutions)

Father Muller Road, Kankanady, Mangaluru-575002

Website: [www.fathermuller.edu.in](http://www.fathermuller.edu.in) Email ID: [fmcosh@fathermuller.in](mailto:fmcosh@fathermuller.in)

Tel No : ( 0824)-2238022/2238522

(NAAC ACCREDITED, RECOGNIZED BY RCI & UGC, PERMANENTLY AFFILIATED BY MANGALORE UNIVERSITY)



## APPLICATION FOR ADMISSION TO SPEECH AND HEARING COURSE FOR THE ACADEMIC YEAR 2018-2019

COURSE APPLIED FOR:

BACHELOR OF AUDIOLOGY & SPEECH LANGUAGE PATHOLOGY  
(B.A.S.L.P)

APPLICATION NO:

From:

.....

.....

.....

Pin code .....

DD/RTGS/ NEFT No. :

Dated :

Bank :

### DECLARATION BY THE CANDIDATE

I hereby state that I have filled this form myself and to the best of my knowledge, the particulars given below are true. I have read and understood its Prospectus and undertake to abide by all the rules and regulations. I also agree to follow the discipline of the College and promise not to indulge in any form of activity that will bring down the name of the Institution:

Signature of Parent/Guardian

Signature of Candidate

1. Name of the Applicant in full:

(BLOCK LETTERS)

2. Name of the Father:

3. Name of the Mother:

4. Date of Birth:

Place of Birth:

5. Sex:

6. Height:

7. Weight:

8. Identification marks (1)

(2)

9. Health Status – Any past illness

10. Passport No.:

11. Nationality:

12. State of Present Residence:

13. State of Domicile:

14. Religion:

15. Caste:

16. Aadhaar No:

17. Blood Group:

18. Mother Tongue:

19. Languages Known:

Read.....

Write.....

Speak.....

20. Annual Income of the Family: .....

Please stick  
passport size  
photo

21. Permanent Address:  Pincode: .....	22. Correspondence Address:  Pincode: .....
23. Telephone: (Res) STD Code: ..... Number: ..... (Off) STD Code: ..... Number: ..... Mobile Number: ..... Email id: .....	24. Telephone: (Res) STD Code: ..... Number: ..... (Off) STD Code: ..... Number: ..... Mobile Number: ..... Email id:.....

Class	Name of the School	Year of Passing	Place	Marks	
				Max.	Obtained.
SSLC					
PUC / 10+2					
<b>Compulsory Subjects</b>					
Physics					
Chemistry					
Biology					
<b>Other Subject</b>					

**BRIEF FAMILY HISTORY:**

	NAME	Age	Health Status	Qualification/ Designation	Place of Work	Income
<b>Father</b>						
<b>Mother</b>						
<b>Brothers</b>						
<b>Sisters</b>						

Details of Extra Curricular Activities if any .....

Hobbies .....

Please enclose following documents. - 1) Copies of the marks card SSLC and PUC  
2) Medical Fitness certificate and a copy of Aadhaar card

**DECLARATION**

I hereby declare that the information given here is true. I shall abide by all the rules of the institute regarding discipline and study. I shall try to do my best to excel in studies. I will pay the fees regularly and in case I discontinue I shall pay the full amount.

**Signature of the candidate**

**Signature of the Parent**

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**N.B 1. We do not have any agents/ agencies for admission**

2. Beware of people posing as middlemen and touts promising admission on various pretexts including money and other incentives... Do not fall victim to such promises in case of such cheating, the college will not take any responsibility!

**Application fees Rs.2000 payable as DD/ RTGS/NEFT Syndicate Bank, FMCI Branch, Account Number: 0239216000117, IFSC Code: SYNB0000239**