

STUDENT REGISTRATION FORM

- Fill details in English using CAPITAL Letters
- Use black or blue Hi-Tech point pen for filling details
- Please tick wherever needed
- Mail the filled application To:
The Director Admissions, P.R. Institutions,
 Trichy – Thanjavur National Highway-67,
 Vallam, Thanjavur – 613 403. Tamil Nadu, India.

Application No :

ADMIN TYPE

Roll No :

Programme / Branch

Admission Date :

 -


FOR OFFICE USE

INSTITUTION : PREC PR CET PRPC PRIST

CAMPUS : THANJAVUR EAST THANJAVUR WEST CHENNAI CAMPUS-1
 CHENNAI CAMPUS-2 CHENNAI CAMPUS-3 TRICHY PUDUCHERRY
 KUMBAKONAM MADURAI

1. PHOTOGRAPH

Paste your recent passport size color photograph
Do not pin or staple

APPLICANT'S INFORMATION

Name

DOB AGE Gender

Religion : HINDU CHRISTIAN MUSLIM OTHERS Specify:

Community : General / OC OBC BC MBC DNC SC ST OTHERS Specify:

Nationality : Indian NRI Foreign National (Citizenship) :

Mother Tongue Blood Group Hostel Required YES NO

Father's Name

Mother's Name

Father's Mobile Mother's Mobile

Father's Occupation Annual Income

Mother's Occupation Annual Income

ADDRESS FOR CORRESPONDENCE (DO NOT REPEAT NAME)

Pin Code District

State Country

Mobile Telephone with Code

E-Mail

Remarks

Admin staff's sign. with date

Parent's sign. with date

Student's sign. with date