



PAAVAI EDUCATIONAL INSTITUTIONS

Engineering, Polytechnic, B.Ed., Allied Health Science, Nursing, Pharmacy, Physiotherapy & Arts and Science
NH-44, Pachal, Namakkal - 637 018.

PRE ADMISSION FORM

1. Admission sought for (Please tick ✓)	B.E / B.Tech		Diploma		MBA	MCA	M.E.	Pharmacy	Nursing	AHS	BPT	B.Ed.	Arts & Science Women									
	First Year	Lateral	First Year	Lateral																		
2. Name of the Candidate (In Capital Letters)													Gender :	<input type="checkbox"/> M	<input type="checkbox"/> F							
3. Father's Name													Age :	<input type="text"/>								
4. Mother's Name													Hostel :	<input type="checkbox"/> Y	<input type="checkbox"/> N							
5. Occupation & Annual Income													First Graduate :	<input type="checkbox"/> Y	<input type="checkbox"/> N							
6. Address for Communication																						
7. Mobile Nos.	i. <input type="text"/>					ii. <input type="text"/>					Pincode <input type="text"/>											
8. Whats App No.	<input type="text"/>					Aadhar No: <input type="text"/>																
9. Email ID	<input type="text"/>																					
10. Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Community :								<input type="checkbox"/> OC	<input type="checkbox"/> BC	<input type="checkbox"/> BCM	<input type="checkbox"/> MBC	<input type="checkbox"/> DNC	<input type="checkbox"/> SC	<input type="checkbox"/> SCA	<input type="checkbox"/> SCC	<input type="checkbox"/> ST
11. Qualification & Total Marks secured	S.S.L.C. Reg No.								S.S.L.C. Total Marks.													
11.a. 6th to 12th Studied(Plz ✓)	H.Sc. Reg No.								H.Sc. Total Marks				H.Sc. Group:									
1) Government <input type="checkbox"/>	Maths		Physics		Chemistry				Cut Off:													
2) Government Aided <input type="checkbox"/>	Biology		Botany		Zoology																	
3) Private <input type="checkbox"/>	Name of the Diploma / Degree								Percentage of Marks (or) CGPA													
12. Name of the School / College studied	<input type="text"/>																					
13. Choice of Branch	<input type="text"/>																					
14. Source of Enquiry (Please tick ✓)	<input type="checkbox"/> Social Media	<input type="checkbox"/> News Paper	<input type="checkbox"/> Staff	<input type="checkbox"/> Friends	<input type="checkbox"/> Students	<input type="checkbox"/> TV	<input type="checkbox"/> Others															
15. Referred by (Name & Cell No.):	<input type="text"/>																					
16. Place & Date	<input type="text"/>																					
17. Attended by	<input type="text"/>																					

Signature of the Candidate

FOR OFFICE USE ONLY

Admitted in	<input type="checkbox"/> PEC	<input type="checkbox"/> PCE	<input type="checkbox"/> PPC	<input type="checkbox"/> PCPR	<input type="checkbox"/> PCNR	<input type="checkbox"/> PIAHS	<input type="checkbox"/> PPSC	<input type="checkbox"/> PCED	<input type="checkbox"/> PASCW	
Year / Branch	<input type="checkbox"/> I	<input type="checkbox"/> II	<input type="text"/>							
Hostel / Dayscholar	<input type="checkbox"/> D	<input type="checkbox"/> H								
Certificate Received	<input type="checkbox"/> 10 th	<input type="checkbox"/> 11 th	<input type="checkbox"/> 12 th	<input type="checkbox"/> C.C	<input type="checkbox"/> TC	<input type="checkbox"/> FG				
Date	<input type="text"/>									

Signature of the Staff