



L.K. Memorial Charitable Trust (R)
Mysore School of Architecture

Recognised by COA, New Delhi and Affiliated to Visvesvaraya Technological University, Belagavi.

*CA - 01, University Layout, Lingambudi, Near Dattagalli Ring Road, Lingambudi, MYSORE - 570008. TEL: 0821 - 2970895, 320 5881,
 MOB: 0988 603 9980, 0988 037 9822, FAX: 0821- 2970868, e-mail: msamysuru@gmail.com, website: www.msa.in.net*

APPLICATION FOR ADMISSION TO BACHELOR OF ARCHITECTURE (B.ARCH).

Admission Category

GET Concessional Fees

COMED K

Management

Admission No.

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Personal Details

1. Name of the Student :
*as mentioned in 10th /
 SSLC Certificate*

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First Name

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Surname

2. Gender : M F

3. Blood Group :

4. DOB :

D D M M Y Y

AFFIX
PASSPORT SIZE
PHOTO

Signature of the Student

5. Nationality : _____

6. Religion : _____

7. Category : _____

SC/ST/GM/OBC

8. Name of the Father :
as in Transfer Certificate

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9. Occupation of Father : _____

10. Designation : _____

11. Name of the Organization :
presently working

12. Annual Income: _____

13. Name of the Mother :
as in Transfer Certificate

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14. Occupation of Mother : _____

15. Designation : _____

16. Name of the Organization :
presently working

17. Annual Income: _____

Competitive/ Entrance Examinations Appeared

Examination(s) Appeared	Registration No. (if any)	Rank / Score Obtained
NATA (Compulsory)		
GET		
COMED K		
JEE (B.Arch)		

Permanent Address

Pincode

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Phone # _____

Mobile # _____

Email id: _____

Address for correspondence

Pincode

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Phone # _____

Mobile # _____

Email id: _____

18. Hostel Facility Required : Yes No 19. Transport Facility Required : Yes No

Qualifying Examination

20. College last attended: _____

21. State/Board/University: _____

PUC/XII/ Dipolma in	Month and Year	Reg. No.	Medium

Subject	Marks	Max. Marks	Attempt	Aggregate %	
Physics				in PCM	PUC II Year overall
Chemistry					
Maths					
Diploma					

SSLC / Xth		Board : _____	Marks	/	%
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22. Extra Curricular Activities: NCC/NSS/Scout-Guide/ _____

23. Hobbies & Intrests: _____

24. Sports & Games: _____

25. Reference (Name and Adress of 2 responsible persons knowing you)

1 _____ 2 _____

_____ Pincode

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Phone # _____

_____ Pincode

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Phone # _____

Declaration by the Applicant

I hereby declare that the statements made in the application are true to the best of my knowledge and belief. I have gone through the instruction for admission carefully and I undertake to abide by all the rules and regulations of the College, Hostel and Affiliated University.

I undertake that, so long as I am a student of the college, I will not do anything unworthy of a student of the college or anything that will interfere with its orderly working and discipline. I am aware that, the college authorities have the full authority to expel me for disntres in studies, misbehaviour and continuous failure.

Place: _____

Date: _____

Applicant's Signature

Declaration by the Father/Guardian

I hereby declare that , I have known the financial obligation of my son / daughter/ward Mr./Miss _____ and I can afford and undertake to pay the tuition fees payable to the Institution under the rules of the College. I will keep track on his academic performance and I agree to pay 100% of the College tuition fees of the remaining part of the course if my son/ daughter/ ward leaves the Institute in the middle of the course.

Place: _____

Date: _____

Applicant's Signature

Signature of Father / Guardian

Application Fee Details

Details of the Application Fee of Rs.1000/- (non- refundable) drawn in favour of L. K. Memorial Charitable Trust.

DD No.

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Date

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Bank/ Branch _____

(FOR OFFICE USE ONLY)

No. : _____

Year : _____

Admitted Under _____

Reg. No. _____

Transfer Certificate _____

Migration Certificate _____

Eligibility Certificate _____

Fees Paid Rt. No. _____

Original Documents Submitted	SSLC	PUC	Diploma _____	No.	Migration	Caste / Minority
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Received by _____

(Authorized Signatory)

GENERAL INSTRUCTIONS TO THE CANDIDATES SEEKING ADMISSION FOR THIS ACADEMIC YEAR.

- Check list of the Documents to be submitted by the candidates selected through KEA/CET

- o Admssion order issued by KEA
- o II PUC/ XII th Standard Marks Card
- o Proof of the Date of Birth (SSLC/10th Standard marks Card)
- o Caste Certificate in case of reserved Category
- o Seven years Study certificate in Karnataka
- o Certificate of special category
- o NATA Score Card (for Architecture Course)
- o Transfer Certificate
- o Migration Certificate shall be submitted by non- Karnataka Students only
- o Recent photos- Passport (6 No.s) and Stamp Size (2 No.s)

- Check list of Documents to be submitted by the candidates selected through COMEDK / Management

- o Admission order issued by COMEDK / Management
- o II PUC/ XII th Standard Marks Card
- o Proof of the Date of Birth (SSLC/10th Standard marks Card)
- o NATA Score Card (for Architecture Course)
- o Transfer Certificate
- o Migration Certificate shall be submitted by non- Karnataka Students only
- o Recent photos- Passport (6 No.s) and Stamp Size (2 No.s)

SUBMIT ORIGINALS OF ALL THE DOCUMENTS FOR VERIFICATION ALONG WITH TWO SETS COPIES DULLY ATTESTED

Important Note for COMEDK and Management Students:

Since the originals will be returned only after the verification by the university, students are advised to maintain desired no. of attested photocopies of all the original documents.

ANTI RAGGING AFFIDAVIT

Compulsory Document (Affidavit) to be submitted by all the candidates. All the students are mandated to submit the Anti-Ragging Affidavit of the student and parent duly attested by oath commissioner.

The duly filled affidavits are to be submitted to the college along with the application form without fail.

Note: Duly filled application forms along with DD should reach Mysore School of Architecture, CA-01, University Layout, Lingambudi, Near Dattagalli Ring Road, Mysore - 570008

For queries if any contact TEL: 0821- 3205881, 2970895, MOB: 09886039980, 09880379822

ANNEXURE I

AFFIDAVIT BY THE STUDENT

1) I, _____ (full name of student with admission/ registration/ enrolment number) s/o / d/o of Mr./Mrs./Ms. _____, having been admitted to Mysore School of Architecture, Mysore have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (here in after called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that

a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.

b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.

6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of deponent

Name:

Address:

Telephone/ Mobile No.:

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on this the _____ (day) of _____ (month) _____ (year).

Signature of deponent

Solemnly affirmed and signed in my presence on this the _____ (day) of _____ (month) _____ (year) after reading the contents of this affidavit.

OATH COMMISSIONER

ANNEXURE II

AFFIDAVIT BY PARENT/GUARDIAN

1) I, Mr./ Mrs./ Ms. _____ (full name of parent/guardian) father/mother/guardian of _____ (full name of student having been admitted to with admission/ registration/ enrolment number, Mysore School of Architecture, Mysore have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that

a) My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.

b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations

5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.

6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of deponent

Name:

Address:

Telephone/ Mobile No.:

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on this the _____ (day) of _____ (month) _____ (year).

Signature of deponent

Solemnly affirmed and signed in my presence on this the _____ (day) of _____ (month) _____ (year) after reading the contents of this affidavit.

OATH COMMISSIONER

