

INSTITUTE OF COMMUNICATION

Kakkanad, Cochin 682030

APPLICATION FOR COMMON ENTRANCE EXAMINATION 2018-19

Affix Passport size photo

- 1. PG Diploma in Journalism and Communication**
- 2. PG Diploma in Television Journalism**
- 3. PG Diploma in Public Relations and Advertising**

1	Name of applicant (in capital letters)	Mr./Mrs./Kumari.....
2	Age & Date of Birth	
3	Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>
4	Marital Status	Single <input type="checkbox"/> Married <input type="checkbox"/>
5	Address for Communication with pin code (in capital letter)	
6	Telephone Number with STD Code	Mob..... Res.....
7	Email	
8	Course applied for	1 st Choice <input type="checkbox"/> 2 nd Choice <input type="checkbox"/> 3 rd Choice <input type="checkbox"/>

9	Entrance examination centre (please tick the appropriate centre)	Kollam <input type="checkbox"/> Kochi <input type="checkbox"/> Kozhikode <input type="checkbox"/>			
10	Name and Occupation of Father / Mother				
11	Religion / Community <i>(Candidates belonging to Scheduled Caste / Scheduled Tribe / OEC may specify the Community)</i>				
12	Whether the Candidate has passed his/ her Graduation?	Yes <input type="checkbox"/> No <input type="checkbox"/> Result awaiting <input type="checkbox"/>			
13	Educational qualifications with details of qualifying examinations	Qualifying examinations	Year of passing	Marks scored / Grade	Percentage of Marks
		SSLC			
		Plus two/HSC			
		Degree			
		Additional Qualifications 			
14	Name of School and College attended	SSLC : Plus two/HSC : Graduation :			
15	What are your areas of Special interest				
16	Do you have any work experience? Are you presently employed? Give details				

17	<p>Payment Details (Total Fee Rs. 300 / (150 for SC / ST / OEC Candidates) Enclosed with Demand Daft No.....date.....of..... (Name of Bank) drawn in favour of Secretary, Kerala Media Academy, Kochi-30 payable at Ernakulam Service Branch.</p>
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***NOTE: SEND THE DEMAND DRAFT ALONG WITH THE APPLICATION FORM**

Declaration

I _____ hereby declare that the particulars given above are correct to the best of my knowledge and that I shall abide by the rules of the institute. I undertake to pay the fee and other dues as and when required.

Date:

Signature of the Candidate

Name

FOR OFFICE USE ONLY

ADMISSION GRANTED/ DENIED :

PARTICULARS OF FEE PAYMENT :

REMARKS :