



AMBITIYA INSTITUTE

அம்பீஷியா கல்வி பயிற்சி நிறுவனம்

III Floor, New No:168, G.S.T.Road, Next to Rrase Hospital Chrompet, Chennai-600 044.

9841517521, 044 - 42876539

www.ambitiya.com

Application Form for Admission into.....

Admission No. :.....

Name of the Candidate :.....

Father's / Husband Name :.....

Mother's Name :.....

Date of Birth :.....

Residential / Postal Address :.....

Pin Code :.....

Contact No. :.....

Sex (Male / Female) :.....

Marital Status : Married / Un Married

Nationality :..... Medium of Study :.....

Your Previous Qualification Register No. ::.....

Year of Passing X Board Exam :.....

I Promise to abide by the rules, regulations and orders of the AMBITIYA INSTITUTE its authorities and officers, I also declare that statements, I have made in this application are correct.

Date :

Signature of the Candidate

I agree to the applicant's to the Course to the Institute. I shall be responsible for the payment of all his fees and other charges, I shall be responsible for his/her conduct and good behaviour during the period of his/her institute career.

Date :

Signature of the Parent / Guardian

OFFICE USE ONLY

ADMITTED / REJECTED

Fee

1.

2.

3.

Signature of the Office Incharge

Signature of the Correspondent