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**Continuing Education Centre**  
**Government Polytechnic College, Chelakkara**  
**Thrissur 680586**

No.

(By office)

**Application Form**

(To be filled in block letters or type written)

Photograph

1. Name of the Applicant : \_\_\_\_\_
2. Date of Birth & Age : \_\_\_\_\_
3. Sex : Male / Female \_\_\_\_\_
4. Religion : \_\_\_\_\_
5. Caste : \_\_\_\_\_
6. Name of Parent/ Guardian : \_\_\_\_\_
7. Address for Correspondence : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Phone Number : \_\_\_\_\_
9. Educational Qualification

Name of Examination Passed	Subject	Board / University	Year of Passing	% of Marks

10. Details of Experience, if any : \_\_\_\_\_

11. Course Which Admission is Seeking for : \_\_\_\_\_

**DECLARATION**

I \_\_\_\_\_ hereby solemnly declare that the particulars furnished above are true to the best of my knowledge and belief and further affirm that I shall abide by the rules and regulations of the Institution, now in force as per the prospectus and as amended or altered from time to time. I also affirm that I will not discontinue before the termination of the course.

Place:

Date:

Signature of Candidate

**DECLARATION BY PARENT / GUARDIAN**

I have gone through the prospectus of the Institution and hereby declare that the application is made with my consent, I undertake the entire responsibility of the good conduct of my ward, payment of full fees without default in time and making my ward complete the prescribed course.

Place:

Date:

Signature of Guardian

**NOTE : FEE ONCE COLLECTED WILL NOT BE REFUNDED IN ANY CASE.**

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**FOR OFFICE USE ONLY**

Admitted / Not Admitted

Manager