

# APPLICATION FORM FOR SYRO-MALANKARA CATHOLIC CANDIDATES

(APPLICABLE FOR ALL COURSES – ADMISSION 2017-18)

**(To be filled by the Parish Priest)**

Application No. \_\_\_\_\_

Name of the Candidate: \_\_\_\_\_

Name of Father: \_\_\_\_\_

Name of the Mother: \_\_\_\_\_

Residential Address with PIN Code

Name of the Parish with Address and PIN Code

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of the Parish Priest (Contact Tel./Mob. No.)

Name of the Archdiocese / Diocese

\_\_\_\_\_

\_\_\_\_\_

Year of Passing Class X in Sunday School : \_\_\_\_\_

Whether Passed Class XII in Sunday School: Yes / No  
If Yes, Year of Passing: \_\_\_\_\_

Any Priest / Nun in the Family: \_\_\_\_\_

## Religious and Church related activities

Activity / Attitude	Poor (0)	Average (1)	Good(2)	Very Good(3)
Regularity in attending Sunday Mass				
Regularity in attending Sunday School Classes				
Participation in Youth Activities of the Church				
Attitude of the family towards the Church				
Any other activities to be mentioned:				

Place: \_\_\_\_\_

Date: \_\_\_\_\_ Parish Priest Signature with Parish Seal

**NB:** Candidates admitted for MBBS Course 2017-18 should execute a Service Bond as informed by the Commissioner for Entrance Examinations, Thiruvananthapuram

## SYRO-MALANKARA CATHOLIC COMMUNITY CERTIFICATE

Certified that Sri/Smt/Kum \_\_\_\_\_ with KEAM 2017 / NEET UG 2017 / LBS / any other Entrance Roll No. (Please specify) \_\_\_\_\_ with the aforesaid details is a member of the \_\_\_\_\_ Parish of the Archdiocese / Diocese of \_\_\_\_\_ Syro-Malankara Catholic Church.

Date: \_\_\_\_\_ Parish Seal

\_\_\_\_\_  
Name and Signature of the Vicar

Date: \_\_\_\_\_ Archdiocese / Diocese Seal

\_\_\_\_\_  
Name & Signature of the Archdiocesan / Diocesan Bishop