

MANAGEMENT QUOTA SPONSORSHIP FORM - AIDED (to be uploaded by the applicant in the college website)

M G UNIVERSITY CAP APPLICATION NUMBER			
Name of the applicant (in capital)			
Age			
Date of birth			
Name of parent			
Mobile number of parent			
Mobile number of student			
Address			
Religion			
Community			
Name of the Degree Programme			
Year of Passing			
Name of the Institution Attended			
University from which Degree Obtained			
Percentage/CCPA obtained for the Degree Programme			
If the applicant has studied any other course after qualifying examination, mention the following details: a. Name of the course b. Name of the Institution last attended c. Period of study d. Whether the course was completed			
PG Programme to which admission is sought			
Application Fees Payment Details			
Transaction Id (SBI Collect Reference Number)			
Date of Transaction			
Amount			

Signature of the parent with date

Signature of the applicant with date

	CERTIFICATE OF THE SPONSOR	
·	ateis kno oide by all rules and regulations of the college. I hereby undertake full respon ur.	
I recommend his/her case for adm	ission.	
Name of Sponsor		
Address:		
Phone No.		
Mob No.	Signature of the Sponsor	· with date
The applicant	2 - (to be obtained after intimation from the college) Recommendation of the concerned HOD	
	PRINCIPAL'S ORDER	
The applicant	shall be ad	mitted under
Management Quota for	Programme.	

Date: PRINCIPAL