

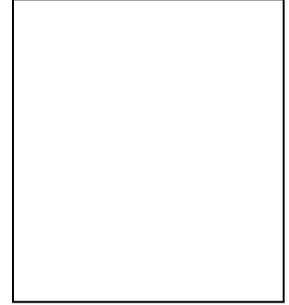


by your light
we see the light

KRISTU JYOTI COLLEGE

Department of Philosophy
Bosco Nagar, Krishnarajapuram
Bengaluru 560036

Ph: 9482331340 (Principal); 6363231127 (Registrar)
Email: kjcprincipal@gmail.com; registrar.kristujyoti@gmail.com



Application No: _____

Two-Year Basic Course in Philosophy APPLICATION FOR ADMISSION

(Please use **BLOCK LETTERS**)

01. Surname
02. Name(s).....
03. Your Name in the Religious Congregation
(if you have a *different* name)
04. Date of Birth: DayMonth Year
05. Place of Birth
06. Parish of Origin
07. Diocese of Origin
08. Religious Congregation
09. Province
10. Name of the Superior
11. Designation (e.g. General / Provincial etc.) of the Guardian / Point of Reference, to whom future communications may be sent:
12. Address of the Guardian / Point of Reference:
.....
.....
13. Address of the Applicant:
 - a) Permanent:
.....
Phone No: E-mail:
 - b) Local :
.....
Phone No: E-mail:

14. Educational Qualifications (High School Studies, Higher Secondary Studies/ Pre-University, University Studies, etc. Please specify Course, Institution, Place & Duration)

- a)
-
- b).....
-
- c)
-
- d).....
-

15. Documents attached

- One copy of the mark-list and certificate of the Plus-two Course or its equivalent
- Letter of Recommendation of the Bishop /Provincial / Religious Superior
- Photographs (three of passport-size and 6 of stamp-size)
-
-

Date:

Place:

.....
Signature of the Applicant

Note:

Requirements for Admission to the Two-Year Basic Course in Philosophy

- The completion of the Plus-two/Pre-Degree Course or its equivalent.
- An adequate knowledge of English, tested by an Entrance Exam.

The College reserves to itself all rights to admission

The Coordinator,
Department of Philosophy,
Kristu Jyoti College,
Bangalore – 560 036.

(For office purposes only)

Admission No: _____

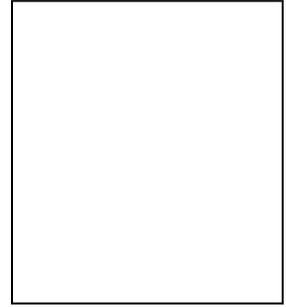


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Application No: _____

Two-Year Basic Course in Philosophy PERSONAL SCHEDA

(Please use **BLOCK LETTERS**)

I. General Information:

Surname:

Name(s):

Father's Name:

Mother's Name:

Birth: Day Month..... Year

CityState Country

Diocese of Origin:

II. Ecclesiastical Curriculum:

Name of the Religious Congregation:

Religious Congregation's abbreviation:

Province:

First Profession: Where? When?

Perpetual Profession: Where? When?

III. Educational qualifications:

a) High School:

Certificate:

Name of School:

Place: Year of Completion:.....

b) Higher Secondary School / Pre-University:

Certificate:

Name of School / College:

Place: Year of Completion:

c) University Studies:

Degree:Duration:

Name of the College:

Place:Year of Completion:

d) Other Studies (if any):

Degree:Duration:

Name of the College:

Place:Year of Completion:

IV. Accommodation:

Institution:

Address:

.....

.....Pin Code:

Phone No:E-mail:

Remarks:

Date:

Place:

.....

Signature of the Applicant

(For office purposes only)

Admission No: _____