

COCHIN UNIVERSITY OF SCIENCE AND TECHNOLOGY

GENERAL FORM

*Return of Matriculates admitted tofor the academic year 200 - 2000 **PAGE No**

Serial No.	School Leaving Certificate Holder			Name of father or guardian	Date of birth in the Christian Era	Religion and Community	Mother tongue	School where educated	School leaving Certificate		Name of Government or State under whose authority Certificate is issued	Date of Admission in to the Department	Year of eligibility for University Course of study	Date and Page of Gazette
	Principal Name *(In block letters)	Initials	**Expansion of Initials						Register No.	Year & Month				

College/Dept.

Date:

I do certify that the candidates mentioned in the Return have been declared eligible for admission to a course of study in this University and that their names are found in the eligible list in the respective pages of the Kerala Govt. Gazettee mentioned against each.

*Only the principal name of the candidate should be entered in this column. **Names other than the principal names should be entered here. Corrections, additions or deletions made, should be attested.

*This return should contain the details of all students admitted.

Head of the Department