



**PGP COLLEGE OF PHYSIOTHERAPY  
AND RESEARCH INSTITUTE  
NAMAKKAL - 637 207**



(Approved by Govt. of Tamilnadu G.O (MS) No. 400, Affiliated to The Tamilnadu Dr. MGR Medical University, Chennai)

**Phone: 8939833471 Email: physio@pgpews.com**

**APPLICATION FOR ADMISSIONS IN B.P.T DEGREE COURSE – 4 ½ Years**

**(To be filled in CAPITAL LETTERS by the candidate)**

**APPLICATION No.:**

Quota: GQ / MQ

1. Name of the applicant:  
(As given in the School  
Leaving Certificate)

2. Date of Birth & Age:  
(DD/MM/YY)

Gender (M/F):

3. Father/Guardian's Name:

4. Mother's Name:

5. Parent's Occupation & Annual Income:

6. Nationality & Religion:

7. Category & Caste:  
(BC/MBC/SC/ST/OBC/GEN Attach Proof)

8. Whether First Graduate (Attach Proof): Yes / No

9. Do you require Hostel Accommodation: Yes / No

10. Permanent Address of Parent/Guardian  
with Phone No. & Email:

PASSPORT  
SIZE  
PHOTOGRAPH

11. Marks obtained in HSC or Equivalent Examination (Attach proof)

Subjects	Registration Number	Month & Year of Passing	Marks Obtained	Maximum Marks	P/C/B or B/Z Cut off mark (for GQ only)
Physics					
Chemistry					
Biology					
Botany					
Zoology					
Mathematics					
Total & Percentage					

**DECLARATION BY THE PARENT/GUARDIAN AND THE CANDIDATE**

We.....S/o/D/o.....  
 have carefully read the details regarding the admission to the B.P.T Course and agree to abide by the rules and regulations of the college. We declare that the information provided by us in this application is true and correct to the best of our knowledge. In case of any information furnished above is found incorrect we agree to forgo our claim of admission. We further undertake that my ward will not involve in any ragging activities in college and Hostel premises. We understand and accept that disciplinary action and legal case will be filled against my ward if he/she indulges in ragging.

Signature of the candidate

Signature of the Parent / Guardian

Date:

Place:

**OFFICE USE ONLY** (Not to be filled by the candidate)

Roll No./Admission No.:

Date of Admission: