**ST. THOMAS’ COLLEGE, THRISSUR
Application for UGC-NET Coaching**

**Name in Block letters :**

**Gender :**

**Age and Date of Birth :**

**Academic details :**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sl.No.** | **Course/ Degree** | **Period of Study****From - To** | **Board/University/****Institute** | **Subject** | **Marks****(%)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Subject in which to appear for**

**UGC – NET examination :**

**Address for communication :**

**Contact Phone no :**

**E mail ID :**

**Signature of the candidate**

**Date:**

**Place:**