UNIVERSITY OF KERALA  
DEPARTMENT OF FUTURES STUDIES  
Application for Admission to Post Graduate Diploma in Knowledge Management (PGDKM)  
(Under UGC Innovative Programme)  
2018-19

### Details of Application and Registration Fee

<table>
<thead>
<tr>
<th>Pay in slip/D.D.No</th>
<th>Amount</th>
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<td>Date ...............</td>
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Name of Bank

| Affix Passport Size Photograph here |

1. Name of the Applicant (in block letters)

2. Address to which communications are to be sent
   - Telephone number if any
   - E-mail address if any

3. Permanent Address

4. Age and date of birth (In figures and words)

5. Sex

6. Nationality

7. Father's / Guardian's Name and Address

8. Occupation and annual income of parent

9. Name and address of Local guardian, Telephone number if any

10. Have you been in receipt of any
<table>
<thead>
<tr>
<th><strong>Scholarship or fee concession? If so, give details</strong></th>
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<tr>
<td><strong>11. Religion &amp; Community</strong>&lt;br&gt;<em>(Specify whether SC/ST/OBC/OEC/General/Others)</em></td>
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<td><strong>12. Are you a Matriculate of this University</strong></td>
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<td><strong>13. Institution through which matriculated with year</strong></td>
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<td><strong>14. If employed, give details</strong></td>
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<td><strong>15. Educational Qualifications</strong></td>
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<tr>
<th>Examination Passed</th>
<th>Main Subject</th>
<th>Class / Rank</th>
<th>Grade / % of Marks</th>
<th>Year of Passing</th>
<th>College / Institution</th>
<th>University</th>
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| **16. If sponsored candidate, give details** |   |
| **Declaration** |   |

I .................................................................................................. do hereby declare that the statements made in the application are true to the best of my knowledge and belief.

Place:  
Date:  
Signature of the applicant

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<th><strong>For Office use only</strong></th>
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<tbody>
<tr>
<td>Date of Receipt of application:</td>
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<td>Date of admission:</td>
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<td>Admission No:</td>
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<td>Remarks:</td>
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Head of the Department

**UNIVERSITY OF KERALA**
Department of Futures Studies
Entrance Test for admission to PGDKM 2018-19

HALL TICKET

The hall ticket duly filled should be returned along with the application form with photo and signature attested by a Gazatted Officer.

Section I

Date of Test: ……………………….       Time:
Register No:
Place:

Name of Candidate :
Address :

I certify that the photo and signature are that of
…………………………………………
Identifying Officer’s

Signature of the Identifying Officer

Name……………………………………………………………………………
Designation …………………………………………………………….

Signature of the Identifying Officer

(To be signed on the Photograph)
(Office Seal)

Affix Passport Size Photograph here
Section I to be detached and handed over to the Invigilator at the time of examination
........................................................................................................................................Cut Here
........................................................................................................................................

Section II

Date of Test: ................................ Time:  
Register No:  
Place:  

Name of Candidate :  
Address :  
Candidate

Signature of the