

## KUWAIT MALANKARA RITE MOVEMENT (MCA-KUWAIT) KALALAYA SANTHWANA – 2009 APPLICATION FORM

| Applicant Name   |         |              |           |            |                |
|--|---------|--------------|-----------|------------|----------------|
| Diocese & Parish Name  |         |              |           |            |                |
| Permanent Address &  |         |              | 1         |            |                |
| Telephone No.  |         |              |           |            |                |
| Age & Date of birth  |         |              |           |            |                |
| Course Applied for   |         |              |           |            |                |
| Name of Institution  |         |              |           |            |                |
| Duration & Total course fee  |         | Years        |           | Rs         |                |
| Family details:-   |         | I            |           |            |                |
| Name   | Age     | Relationship | Education | Occupation | Monthly Income |
|  |         | Father       |           |            |                |
|  |         | Mother       |           |            |                |
|  |         | 11204101     |           |            |                |
|  |         |              |           |            |                |
| Total family monthly income Rs   |         |              |           |            |                |
| Have you completed C   | Course? | se?          |           | Yes / No   |                |
| Are you a member of N  | ACYM?   | Yes / No     |           | / No       |                |
| Attached Front page copy of SSLC book                                  |         |              |           | Yes / No   |                |
| Qualified examination mark list copy                                   |         |              |           | Yes / No   |                |
| Proof of admission (co   | ору     |              | Yes / No  |            |                |
| Passport size photo (two)  |         |              |           | Yes / No   |                |
| Affidavit of Vicar as per the overleaf eligibility criteria 13 (5)     |         |              |           | Yes / No   |                |
| Signature of Applicant         Date//2009                              |         |              |           |            |                |
| Name & Signatures  1. Vicar  |         |              |           |            |                |
|  |         |              | _         | Parish Se  | al             |
| 2. Director, MCA Regional Committee 3. Director, MCA Central Committee |         |              |           |            |                |
| -  |         |              |           |            |                |
|  |         |              |           |            |                |

Our website : <u>www.kmrm.net</u>