



In the name of ALMIGHTY ALLAH, the Most Beneficent, the Most Merciful

KALIMA TRUST

(Kumari Arabian Living Integrated Muslim Association)

Reg Office : 73D 2-3, Afham Complex, Opp. Of IOB Elankadai Branch, Parakkai Road, Nagercoil – 629 002, Kanyakumari District

Web: www.kalimatrust.org

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STUDENT'S REGISTRATION FORM

| | | | | | | | | | | | | | | | | | | | |
|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Name | | | | | | | | | | | | | | | | | | | |
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|--------------|--|----------------------|--|-------------|--|----------------|--|
| Dept. | | Qualification | | Year | | Roll No | |
|--------------|--|----------------------|--|-------------|--|----------------|--|

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|------------|------|--------|------------|--|--|------------|--|------------------|-----|----|----|----|----|
| Sex | Male | Female | DOB | | | Age | | Community | BCM | BC | SC | ST | OT |
|------------|------|--------|------------|--|--|------------|--|------------------|-----|----|----|----|----|

| | | | |
|---------------|--|--------------|--|
| Mobile | | Email | |
|---------------|--|--------------|--|

| | | | |
|----------------------|--|-------------------|--|
| Father's Name | | Occupation | |
|----------------------|--|-------------------|--|

| Present Address (Hostel/Outside stay) | | Permanent Address | |
|---------------------------------------|--|-------------------|--|
| | | | |
| | | | |
| | | | |
| Pincode | | Pincode | |

| Languages Known | Reading | Writing | Speaking |
|-----------------|---------|---------|----------|
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| | | | |
| | | | |

Regular Activities / Hobby (Please Tick) :

| Reading Books | Diary Writing | Prayer | Physical exercises | Yoga |
|-------------------|---------------|-----------------------|--------------------|------|
| Photography | Meditation | | | |
| Positive Features | | Scope for Improvement | | |
| | | | | |
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| Personalities who inspire you | Reasons |
|-------------------------------|---------|
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|-----------------------|--|
| Life Time Goal | |
|-----------------------|--|

Additional Skills (Please Tick) :

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|----------------------------|-----|----|--------------------|-----|----|---------------------|-----|----|
| Two Wheeler Driving | Yes | No | Car Driving | Yes | No | Type Writing | Yes | No |
| Other skills | | | | | | | | |

Any other related information :

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|----------------|--|--------------------|--|
| Place : | | Name : | |
| Date : | | Signature : | |