



St. Thomas Academy for Research & Training (START)

Nethaji Nagar, Kottoli P.O, Calicut 673 016

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APPLICATION FORM

RESIDENTIAL PLUS ONE/TWO (Kerala Syllabus)

Personal Information

Full Name: _____

Date of Birth: ____ / ____ / ____

Gender: Male Female

Blood Group: _____

Aadhar Number: _____

Phone: _____

Email: _____

Address: _____

PIN Code: _____

Educational Background

SSLC	Year: _____
Board:	<input type="checkbox"/> Kerala <input type="checkbox"/> CBSE <input type="checkbox"/> ICSE
Medium of Study:	<input type="checkbox"/> Malayalam <input type="checkbox"/> English
Percentage/Grade:	_____

Parental Information

Parent	Name	Education	Occupation
Father	_____	_____	_____
Mother	_____	_____	_____

Preferred Stream

Commerce

Humanities

Science

Note:

"START" intends this course to be a foundation programme to prepare students for entry into the Civil Services and other emerging careers. These professions require strong skills in communication and outstanding conceptual and analytical abilities. Students from the Humanities/Commerce/Science streams who dream of such careers will find the course particularly useful because of its emphasis on English language learning, general knowledge, logical reasoning, basic maths, and personality development.

Preferred Careers (List up to 3 choices)

1. _____
2. _____
3. _____

Declaration

I hereby declare that the information provided is true and correct to the best of my knowledge. I understand that this course serves as a foundation program for entry into Civil Services and other professional careers, focusing on English language learning, general knowledge, logical reasoning, basic maths, and personality development.

Applicant's Signature: _____

Date: ___ / ___ / _____

Instructions:

1. Attach a recent passport-size color photo (white background).
2. Ensure all fields are completed accurately.
3. Submit the form along with supporting documents at the START office.

For Office Use Only:

Application Received On: ___ / ___ / _____

Verified By: _____

Remarks: _____