



# COLUMBIA COLLEGE OF PHYSIOTHERAPY

(Managed by Srinidhi Education Trust)

(Recognized by Government of Karnataka Affiliated to Rajiv Gandhi University of Health Sciences, Bengaluru & IAP.)  
# 71, Mariyappanapalya, Gnanabharathi Post, Kengeri Hobli, Bengaluru - 560 056. Karnataka, India.

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[www.columbiacollege.co](http://www.columbiacollege.co)

Application No. : \_\_\_\_\_

Application for admission to Four Years & Six months Bachelor of Physiotherapy (B.P.T)  
for the academic year 20\_\_ - 20\_\_ .

## PERSONAL DATA

To be filled by the candidate.

1. Name of the Applicant in full (Block letters) as per SSLC Record

2. Full Name of Father

3. Full Name of Mother

4. Permanent Address

5. Telephone No.

6. E-mail

7. Gender

8. Age & Date of Birth

9. Religion & Sub-Caste

10. Nationality

11. State to which you belong

12. Languages known to speak

13. Blood Group

14. Aadhar Number

15. Health Condition (mention if any history of chronic illness or Physical defect is present)

16. Address to which correspondence has to be sent

Affix here your  
latest Photograph  
duly attested



### Academic History

CLASS (XII)	Max Marks	Marks Obtained	Instution / School	Year	Place of Study	State	Country
XII							

### XII / PUC MARKS

Subject	Max Marks	Marks Obtained	Percentage
Physics			
Chemistry			
Biology			
<b>TOTAL</b>			

### ATTESTED COPIES OF CERTIFICATES AND OTHER ENCLOSURES REQUIRED: (Do not enclose originals)

- a. Marks Card: SSLC Marks Card  
12 Std. / II P.U.C.  
Higher qualification if any
- b. Transfer Certificate
- c. Migration Certificate (Non Karnataka students)
- d. Medical fitness Certificate from a registered Medical Practitioner.
- e. Submit a Identification proof (Voter ID / Pan Card / Passport / Driving License / Aadhar Card)

- N.B: 1. Application accompanied by the above mentioned certificates only will be considered.  
2. All the certificates should bear the same name, as per S.S.L.C. Certificate.

Dated : .....

Signature of the Candidate

.....  
Signature of the Parent / Guardian

Name & Address

.....  
.....  
(Relationship) .....