COMMANDER ALI'S ACADEMY OF MERCHANT NAVY

(An ISO 9001:2015 certified institution; Approved by DG Shipping, Govt. of India) Survey No.469, Village Donthi, Shivampet Mandal, Medak District, Telangana - 502334, India.

Candidate Enquiry: 09867209187, 07091404348 | E-mail: admission@caamn.in

| APPLICATION |
|-------------|
| NUMBER |

APPLICATION FOR ADMISSION Please tick the required course

DECK CADETS – PRE-SEA TRAINING (3 Months)

GP RATINGS – PRE-SEA TRAINING (6 Months)

CCMC – PRESEA TRAINING (6 Months)

Affix recent passport size photograph here (Taken with in six months)

PLEASE COMPLETE THE FORM IN BLOCK LETTERS

| Personal | Details: |
|----------|----------|
| | |

FULL NAME (in capitals):

(As given in the records of Board/University) (Underline Surname)

Fathers Name (or Mother, if no Father):

Occupation (in full detail):

Now stationed at:

| Address for Correspondence: | Next of kin or Guardian (with relationship) to contact in case of emergency: Name: | | | | | |
|---|---|--|--|--|--|--|
| | Relationship: | | | | | |
| | Address: | | | | | |
| | | | | | | |
| | | | | | | |
| Pin Code: | Pin Code: | | | | | |
| State: | State: | | | | | |
| Mobile / Tel. No.: | Mobile / Tel. No.: | | | | | |
| Fax No. with STD code: | Fax No. with STD code: | | | | | |
| E-mail: | E-mail: | | | | | |
| Date of Birth: (Attach copy of proof of date of birth) Place of Birth: | Nationality: | | | | | |
| State of Birth: | Sex: Male / Female | | | | | |
| Passport No.: (Only if available) Place of Issue: | Date of Issue: Date of Expiry: | | | | | |
| Marital Status: | Height: Cms Weight: Kgs | | | | | |
| Identification Marks (Any Two): | | | | | | |
| Color of Eyes: | Color of Hair: | | | | | |
| Complexion: | Nearest Airport: | | | | | |

| Qualifications: | | | | | | | |
|---|--------------|--------------------------------------|----------------------|-------------------------|--|--|--|
| Name of School or college where you completed 10 th Std. Or 10+2 Std.: | | | | | | | |
| Name of Board: | | | | | | | |
| Month & Year of Passing 10 th Std.: | : | Certifica | ite No.: | | | | |
| Please enter details of results obtai | | | | | | | |
| Subject | | Percentage Marks C | btained Total % | in 10 th STD | | | |
| ENGLISH (X STD) | | | | | | | |
| MATHEMATICS (X STD) | | | | | | | |
| SCIENCE (X STD) | | | | | | | |
| Please enter details of results obtai | ned (Enclose | copy of 12 th Std, Diplor | na or Degree Marks I | Nemo) | | | |
| Subject | | Percentage Marks C | btained PCM A | Aggregate % | | | |
| PHYSICS (XII STD) | | | | | | | |
| CHEMISTRY (XII STD) | | | | | | | |
| MATHEMATICS (XII STD) | | | | | | | |
| ENGLISH (XII STD) | | | | | | | |
| Further Information: | | | | | | | |
| Do you play any Musical Instrument: N | /es / No (If | Yes) Name of Instrument | : | | | | |
| Please give any further appropriate information to support your application e.g. Achievements, Extra Curricular Activities, hobbies, special interests, etc. I hereby declare that I have read and understood the conditions of eligibility for the course to which I seek admission. I fulfil the minimum eligibility criteria and I have provided necessary information in this regard. In the event of any information being found incorrect or misleading my candidature shall be liable to cancellation at any time and I shall not be entitled to refund of any fee paid by me to the Academy. The original certificates will be produced at the time of interview. | | | | | | | |
| Applicants SignatureDate(N.B. If you need some more copies of this application, please take photocopies) | | | | | | | |
| FOR ACADEMY USE | | | | | | | |
| APPLICATION RECEIVED ON | I | INTER | VIEW ON | | | | |
| RESULT OF INTERVIEW | PASSE | 0 | FAILED | | | | |
| MEDICAL EXAMINATION | PASSE |) | FAILED | | | | |
| CET | PASSE | D FAILED | Proof Submitted | YES NO | | | |
| SELECTED TO JOIN | YES | | NO | | | | |