

Application No. :



# Pondicherry Institute of Agricultural Sciences (PIAS)

[In collaboration with ANNAMALAI UNIVERSITY, accredited with 'A' GRADE by NAAC]



## **APPLICATION FOR ADMISSION TO DIPLOMA IN AGRICULTURE / DIPLOMA IN HORTICULTURE**

(ACADEMIC YEAR 2026 2027 )

Note: 1. To be filled in capital letters only.

2. Encircle wherever code number is given applicable to you

1. Name of the Candidate: .....(as entered in the +2 certificate)

2. Name of the Parent / Guardian:.....

3. Address for Communication:

.....  
.....  
.....

PIN CODE

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Phone No. (With STD Code) : .....

Mobile No. : .....

: .....

4. Sex :

Male	Female
1	2

5. Date of Birth :

Date	Month	Year

6. Nationality :

Nationality	Indian	Others
Code No.	1	2

If others, mention below

.....

7. Religion :

Religion	Hinduism	Christianity	Islam	Jainism	Others
Code No.	1	2	3	4	5

If others, mention below

.....

8. Mother tongue :

Mother tongue	Tamil	Malayalam	Telugu	Hindi	Kanadam	Others
Code No.	1	2	3	4	5	6

If others, mention below

.....

9. Community :

Community	General	BC	MBC	OBC	SC	ST
Code No.	1	2	3	4	5	6

Space for affixing  
Passport size  
photograph

## 10. Details of SSLC:

Examination Passed	Month and Year of Passing	Marks Secured	Maximum Marks	Name of the School and Place

## 11. Details of Qualifying Examination Passed:

Examination Passed	Month and Year of Passing	Marks Secured	Maximum Marks	Name of the School and Place

## 12. Subject - Wise Marks in the Qualifying Examination :

Subjects	Marks Secured	Maximum Marks
English		
Mathematics		
Physics		
Chemistry		
Biology (Botany / Zoology)		
Bio-Technology		
Vocational Agriculture		
Any Other		

**DECLARATION BY THE CANDIDATE**

I, ..... Son / Daughter of ..... hereby solemnly declare that the information furnished and the statements given in the application and the enclosures are true, correct, complete and no relevant fact is suppressed.

Place :

Date :

Signature of the Candidate

**DECLARATION BY THE PARENT / GAURDIAN**

I, ..... Parent / Guardian of ..... hereby solemnly declare that I am fully aware of the declaration given by the applicant, my Son / Daughter, and I declare and I bind myself on the same terms contained in the above declaration.

Place :

Date :

Signature of the Parent / Guardian

DD Amount Rs.500 /-

Note : D.D. Drawn in favour of **PONDICHERRY INSTITUTE OF AGRICULTURAL SCIENCES**, Payable at PUDUCHERRY  
Send the Filled Application with DD to CHAIRMAN, PIAS, No.81, Lalitha Nagar Main Road,  
(Opp to Aravind Eye Hospital), Thavalakupam, Puducherry - 605 007