

For Office Us	se on	ly						
Student No:	P	1		1	9			

ENROLMENT FORM POSTAL SUPPORT PROGRAMME FOR CIVIL SERVICES EXAM, 2019

Brilliant Learning Solutions Pvt. Ltd.

No. 24, Gilchrist Avenue,

Chetpet,

Chennai – 600031 Ph: +91 8939188133 PLEASE ENSURE THAT THIS IS THE COURSE YOU WISH TO APPLY AND ENROL FOR.

COMPLETE AND SIGN BOTH SIDES OF THIS FORM.

Affix Passport Size Photo here

 $4.5 \times 4.5 \text{ cms}$ Enclose two signed

photographs with this
Form

(Enrolment forms will not be accepted without three photographs)

Sir,							
Please enrol me as a student of your							
☐ Full Course: Fees: Rs. 23, 750/- + GST Rs. 4275/-, Total Rs. 28, ☐ Full Course less MAIN Optional: Fees: Rs. 16,000/- + GST Rs. 2, ☐ Main Optional Only: Fees: Rs. 7,750/- + GST Rs. 1,395/-, Total 1	880/-, Total Rs. 18, 8	880/-					
☐ I herewith remit the full course fee of	•						
Rs. 28, 025/- Rs. 18,880/- Rs. 9,145/- by							
DD drawn in favour of Brilliant Learning Solutions Pvt. 1	L td, payable at Chen	nai.					
DD No. Bank Net Banking/Online Bank Transfer		Date					
(Bank routing instructions given below) UTR Number	er Date						
For NEFT (send proof along with the application form)							
*I would like to receive all updates and/or promotional materials as text messag	es on my cell phone n	umber given t	elow	Yes L	No		
(Please / the appropriate boxes)							
Fees will not be adjusted or refunded under any circumstances I have read and shall abide by the rules and regulations for this Course given in the Online Prospectus. All matters are subject to the jurisdiction of courts in Chennai only. Yours faithfully, Signature of Applicant Date: (PLEASE PRINT IN BLOCK LETTERS)	BANK ROUTING DETAILS Pay to: Brilliant Learning Solutions Pvt. Ltd. Account No. 803820110000137 CURRENT ACCOUNT BANK OF INDIA MAHALINGAPURAM BRANCH, MAHALINGAPURAM MAIN ROAD NUNGAMBAKKAM, CHENNAI – 600 034. IFSC Code For NEFT: BKID0008038 Note: Payment by NEFT only. Bank charges to be paid by student.						
APPLICANT'S NAME (as in school records) Date of Birth: Date Month Year Category (General/SC/ST/Ex.S.)		Sex:	☐ Male	e 🔲 1	Female		
Name of Parent/Guardian: Permanent Home Address:							
Telephone Number (with STD Code)	Cell Phone: *						
E-Mail: *	PIN CODE:						
Address to which all Correspondence and study material should be despatched:		<u> </u>	•	•	•		
Telephone Number (with STD Code)	Cell Phone: *						
E-Mail: *	PIN CODE:					,	

Brilliant Learning Solutions Pvt. Ltd. reserves the right to use the photographs and/or testimonials from students in promotional / publicity material. The Application Form should be sent to **Brilliant Learning Solutions Pvt. Ltd.** at the address above. Tel. +91 8939188133.

^{*} Denotes mandatory fields. Our course material is in the English Medium only • Fees once paid will not be refunded or adjusted under any circumstances. • No instalment facility. • Enrolment Form will not be accepted without the photograph/s. • PIN CODE, AN ABSOLUTE MUST. • Your application for admission will not be accepted unless your address is complete with Pin Code.

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CIVIL SERVICES EXAM, 2019 MAIN EXAM OPTIONALS

Note: Please read the guidelines given in the Prospectus for choosing optionals. This is an important decision for success

(CHOOSE 1) (PLEASE SEE NOTE BELOW) Sociology ☐ Anthropology ☐ Chemistry **Economics**

	Commerce & Accountancy	Geography
	Electrical Engg.	History
	Management	Mathematics
	Mechanical Engg	Public Administration
	Physics	Political Science and International Relations
	Psychology	Zoology
	Literature(all languages)*	Agriculture*
	☐ Botany*	Animal Husbandry & Veterinary Sc.*
	☐ Medical Science*	Geology*
	☐ Civil Engg.*	Statistics*
	☐ Law*	
	\square Philosophy*	
(Please 🗹 the app	propriate boxes)	
* I understand that	5	
	pport is not available for subjects ion purposes only.	marked with an * and an indication against them is for
(ii) You do N	OT offer material for Indian Lang	ruage (Paper I of Main Exam)
		vt. Ltd of my Prelim Test Roll Number as soon as I receive my Hallnking as soon as the final results are published.

SIGNATURE OF STUDENT Date: