



**INSTITUTE MATER DEI**  
Santa Monica Convent, Old Goa – 403402  
**Mob:** 9021350490 | 7887671562

**E-mail address:** registrar@gmail.com; coordinatorimdgoa@gmail.com  
www.institutematerdei.org

Affix your  
Photograph  
Here

## APPLICATION FORM

**Reg. No.:** \_\_\_\_\_ **(To be filled by the Office); Academic Year:** \_\_\_\_\_

1. Full Name as in H. School Cert. (BLOCK LETTERS): \_\_\_\_\_

2. Religious Name: \_\_\_\_\_

3. Date of Birth as in H. School Cert.: \_\_\_\_\_

Place of Birth (Village or Town and State): \_\_\_\_\_ Blood Group: \_\_\_\_\_

4. Name and Initials of the Religious Congregation you belong to \_\_\_\_\_

Province (Region): \_\_\_\_\_

Date of First Profession: \_\_\_\_\_ Date of Final Profession: \_\_\_\_\_

E-mail of Student: \_\_\_\_\_ Phone: \_\_\_\_\_

5. Language known: \_\_\_\_\_

6. Responsibilities held with duration \_\_\_\_\_

Present Apostolate \_\_\_\_\_

7. Name and Address of your Major Superior

\_\_\_\_\_  
\_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

8. **Course applied for: (Please tick off  what is applicable)**

A	Diploma in Theology for Temporarily Professed & Perpetually Professed (One Year)	
B	Diploma in Animation Programme for Formators (One Year)	
C	Diploma in Philosophy (Two Years)	
D	Baccalaureate in Theology (Three Years)	

**9. Academic Record (Fill in where appropriate)**

<b>Studies you have completed</b>	<b>Course name or Designation</b>	<b>Year of completion</b>	<b>Name &amp; Place of Institution</b>	<b>Percentage-Grade-Class</b>
Senior Secondary or Pre-University or Equivalent				
Graduate Degrees				
Postgraduate Degrees				
BPh or Other Studies in Philosophy				
BTh or Other Studies in Theology				
Others (Specify)				

**10. Documents required at the time of final admission**

- Major Superior's Recommendation Letter
- Recent Passport Size 3 Photographs with **white background**
- High School or Secondary School Certificate
- Secular Degree Certificate
- Postgraduate Certificate
- Philosophy Certificate and Mark sheet for the BTh Applicants
- Theology Certificate (1Yr) and Mark sheet for the Formation Programme Applicants
- Medical Fitness Certificate
- Registration Fee Rs. 1,000/-

**11. Fees to be paid by online transaction**

The Bank Details:

A/c Name : Institute Mater Dei

A/c No. 0321101003826

Bank Name : Canara Bank

Branch : Old Goa

IFSC CODE : CNRB0000321

MICR CODE 403015014

❖ Kindly inform the transfer details for our reference. Last date for payment of fees is **June 30<sup>th</sup>**.

Place:

Date:

\_\_\_\_\_  
Signature