



LIFEGATE COLLEGE OF COUNSELLING

Thiruvananthapuram - 695 015, Kerala, India

Reg. No. 135/2019/IV/PTM/KL/India

email: lifegatecoctvm@gmail.com

Creating a Brighter Future Together | Learning to Live Life in a More Excellent Way!

Admission No

Register No.

APPLICATION FOR ADMISSION

To which program are you seeking admission?

- ☐ **DIPLOMA IN COUNSELLING**
- ☐ **BA IN COUNSELLING & PSYCHOTHERAPY**
- ☐ **MA IN COUNSELLING & PSYCHOTHERAPY**

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Recent Passport Size
Photograph Here

PERSONAL INFORMATION

1. Applicant Details

Full Name (in Block Letters): _____

Date of Birth: ____ / ____ / ____

Age: _____ Years

Gender: ☐ Male ☐ Female ☐ Other

Marital Status: ☐ Single ☐ Married ☐ Widowed ☐ Divorced

Nationality: _____

Mother Tongue: _____

Aadhaar Number: _____

Mobile Number: _____

WhatsApp Number: _____

Email Address: _____

2. Permanent Address

PIN Code: _____

3. Correspondence Address (If Different)

PIN Code: _____

4. Family Information

Relationship	Name	Occupation	Contact Number
Father			
Mother			
Spouse (if married)			

5. Emergency Contact

Name: _____

Relationship: _____

Mobile Number: _____

Address: _____

PIN Code: _____

EDUCATIONAL AND PROFESSIONAL INFORMATION

6. Educational Qualifications

Examination	Institution	University/Board	Year Passed	Percentage/CGPA
SSLC/10th				
Plus Two/12th				
Bachelor's Degree				
Master's Degree (if any)				
Other Qualifications				

7. Professional Experience

Organization/Institution	Position Held	Duration	Nature of Work

8. Ministry / Social Service / Volunteer Experience (Please describe any ministry, counseling, social work, mentoring, teaching, leadership, or community service experience)

9. Previous Exposure to Counselling

☐ None ☐ Basic Training ☐ Certificate Course ☐ Diploma Course ☐ Professional Practice

Please provide details:

10. Language Proficiency

Language	Read	Write	Speak
English	☐	☐	☐
Malayalam	☐	☐	☐
Hindi	☐	☐	☐
Others	☐	☐	☐

11. Computer Skills

☐ MS Office ☐ Internet & Email ☐ Online Learning Platforms
☐ Data Entry ☐ Basic Computer Knowledge ☐ Other: _____

PERSONAL STATEMENT AND DECLARATION

12. Motivation for Pursuing M.A. Counselling

Why do you wish to pursue this programme?

13. Personal Strengths

What strengths do you bring to the counselling profession?

14. Areas for Personal Growth

What areas of your life would you like to develop further?

15. Future Goals

How do you plan to use your counselling training after graduation?

16. Health Information

Do you have any physical, emotional, or medical condition that may require special support during your studies?

☐ Yes ☐ No

If yes, please explain:

17. References

Reference 1

Name: _____

Position/Occupation: _____

Organization: _____

Phone: _____

Email: _____

Relationship to Applicant: _____

Reference 2

Name: _____

Position/Occupation: _____

Organization: _____

Phone: _____

Email: _____

Relationship to Applicant: _____

FOR OFFICE USE ONLY

Application No.

Date Received _____

Documents Verified:

☐ Yes

☐ No

Interview Conducted:

☐ Yes

☐ No

Admission Status:

☐ Selected

☐ Waitlisted

☐ Not Selected

Remarks: _____

Admission Committee Signature:

Date:

Documents to be Attached

☐ Passport-size Photograph

☐ Copy of Aadhaar Card

☐ Degree Certificate(s)

☐ Mark Lists/Transcripts

☐ Transfer Certificate

☐ Conduct Certificate

☐ Experience Certificate (if applicable)

☐ Recommendation Letters

☐ Any Other Supporting Documents