



Application Number :

Date of Application

Course of Study

Name of Applicant

Name of the Parent/Guardian

Phone no

Photograph

**Work Experience** (Attach Resume)

Company/Industry	Period	Position	Job Responsibility

**Extra - Curricular Activities** (Attach separate sheets,if necessary)

	Achievements	Year	Remarks
Athletics and Sports			
Literary			
Cultural			

**Educational Background** (Attach attested copies of certificates)

College/Institution University/Board	Exam/Diploma/Degree	Month/Year of Passing	Marks	
			Score	%

**Examination appeared with Percentile**

MAT Percentile

Address for correspondence

										PIN	<input type="text"/>
--	--	--	--	--	--	--	--	--	--	-----	----------------------

Phone  Fax

E-mail:

Permanent Address

										PIN	<input type="text"/>
--	--	--	--	--	--	--	--	--	--	-----	----------------------

Phone  Mobile

E-mail

Date of Birth  Age  Gender  F  M

Nationality  Caste   SC  ST  OBC

State of Domicile

List of enclosures  
Copies only

SSLC Book  TC  Consolidated Degree Marklist

Plus 2  Migration  MAT Score Card

Degree Certificate  Medical Fitness Certificate

DECLARATION: I hereby declare that all the particulars stated in this application form are true to the best of my knowledge and belief. I have read and understood all provisions of admissions including the conditions of attendance, discipline and code of conduct and agree to abide by them. In the event of submission of fraudulent, incorrect or untrue information or suppression or distortion of any fact like educational qualification, marks, nationality etc. I understand that my admission/degree is liable for cancellation. I further understand that my admission is purely provisional subject to the verification of the eligibility conditions.

I declare that I do not have any chronic medical disorder and that I shall not abstain myself from academic and extra-curricular activities for any reason whatsoever.

\_\_\_\_\_  
Signature of the Applicant

\_\_\_\_\_  
Signature of the Parent/Guardian