

(Use capital Letter only)

Date:

APPLICATION FORM FOR ADMISSION TO M.Tech./M.Des./Ph.D. PROGRAMME

Application Details: Institute Roll Number:			_
Programme: M.Tech./MDes./Ph.I	D		Photo
Discipline: CSE/ECE/ME/SM/DS/N	IS/LA		
Spacialization:			
Students Status: Regular 🗌 Spo	onsored	External	
Program Status: Full Time P	art Time		
Personal Details:			
Full Name:			
Name In Hindi:			
Date of Birth:		Marital Status:	
Gender: Male/Female/Trans Gend	der	Nationality:	
Person with Disability: Yes/No			
Category: OP/EWS/OBC/SC/ST			
Father's Name:			
Father's Occupation:			
Father's Mobile Number:		Email ID:	
Mother's Name:			
Mother's Occupation:			
Mother's Mobile Number:		Email ID:	
Parent Income status:			
Aadhaar Number:			
Contact Details: Address of correspondence: City:	State:	Pin Code:	
Email ID:			
Student's Mobile No.			

GATE/CEED/JRF/SRF Details:

Exam Type:

Exam Year:

Discipline:

Score: All India Rank:

Qualifying Degree:

	University/ Institute		Degree Name		Discipline		Final Results Expected date
Master's		1					
Degree	Sem-I	Sem-II	Sem-III	Sem-IV	Sem-V	Sem-VI	% Marks or grade Average
Bachelor' s Degree	Sei	m-l	Sem-II	Sem-III	Sem-IV	Sem-V	% Marks or grade
							Average
	Sem-VI		Sem-VII	Sem-VIII			

Other Degrees:

Class	Name of Board	Subject	Year of Passing	Marks Obtained
10th				
12th				

Working Experience (If Any)

Details are required for Refunds Purpose:

Name of A/c Holder	A/c Number	Name of the Bank	IFSC Code	Branch Address

Declaration by the applicant:

I certified that all information provided by me in this form is correct to the best of my knowledge and belief. I understand that any willful misrepresentation of facts will result in my dismissal from the Institute. If admitted, I shall abide by all rules and regulations of the Institute.

Signature of the Applicant

Signature of the Parent's Date: