



Application No.

APPLICATION FORM

INSTRUCTIONS

1. Form should be filled in block Capital Letters in English Language with Blue Ink only by the Applicants.
2. Incomplete application will be rejected without any further communication.
3. Filling up to Application form does not guarantee the acceptance of request for admission.

(for Office use only)

Enrollment No. _____

COURSE
APPLIED FOR _____

SESSION: 20 _____

AEC CODE : _____

(As entered in Secondary / Senior Secondary Certificate)

NAME OF
APPLICANT _____GENDER Male ☐ Female ☐ Others ☐DATE OF BIRTH DD MM YY

FATHER'S NAME _____

FATHER'S OCCUPATION _____

MOTHER'S NAME _____

MOTHER'S OCCUPATION _____

NATIONALITY INDIAN ☐ OTHERS ☐ (specify the name of the country) _____SOCIAL STATUS GENERAL ☐ FEMALE ☐ ST ☐ SC ☐ OBC ☐PHYSICALLY HANDICAPPED ☐ _____ MINORITY COMMUNITY ☐ _____
(Type of Disability) (Type of Community)EMPLOYMENT GOVT EMPLOYEE ☐ PVT EMPLOYEE ☐ SELF EMPLOYED ☐ UNEMPLOYED ☐ OTHERS ☐

AADHAR NO. _____

Paste Passport size
photograph
of applicant
Do not use pin or stapler
Enclose
2 Identical photographs
along with
the Application Form

Signature of Applicants

PERMANENT
ADDRESS _____

_____ PIN CODE _____

CITY _____ STATE _____ STD CODE _____

PH. NO. _____ MOB. NO. _____

e-mail _____

MAILING
ADDRESS _____

_____ PIN CODE _____

CITY _____ STATE _____ STD CODE _____

PH. NO. _____ MOB. NO. _____

e-mail _____

HAVE YOU EVER BEEN DEBARRED BY ANY UNIVERSITY / BOARD ? NO ☐ YES ☐

If yes, then attach the details of the same.

Signature of the Applicants

Academic Details (enclose duly true photocopies of the originals)					
S.No.	Name of Examination	Roll No	Year/ Semester	Name of University / Institution / Board	Pass / Fail

Work Experience Details (Furnish Latest three details)		
S.No.	Name and Address of the Organization	Total Experience in Years

DECLARATION BY THE APPLICANT

I hereby declare that aforementioned information and enclosed documents above are true and complete to the best of my knowledge and belief. I have read and understood the rules, regulation and eligibility conditions of the Institute. I shall submit any other document(s) that may be required by the Institute in future. I also agree that the Institute is empowered to cancel my candidature / admission, forego the fee deposited and also the claim for admission, if any information furnished by me is found to be incorrect, misleading or counterfeited. I further declare that the attested photocopies of the Certificates submitted by me at the time of admission are the true copies of the originals.

Enclosure - Attached Zerox Copy of Qualification Certificates & Cast Certificate

Place & Date :

Signature of the Applicant