

STUDENT REGISTRATION FORM

PERSONAL INFORMATION OF STUDENT

Application id					
Name (as per 10 th Certificate)					
Program		Branch		Semester	
Year of Admission		Hosteller		Non-Hosteller	
Date of Birth		Gender(M/F/T)		Nationality	
Blood Group		Category(SC/ST/OBC/GEN)			
Mobile No					
Aadhar No		Religion (Hindu/Sikh/Muslim etc.)			
E-Mail ID					

PERMANENT ADDRESS

Address:				
Distt		State		Pin

PRESENT ADDRESS (Fill - 'As above' (if same as permanent Address))

Address:				
Distt		State		Pin

	Father of Student	Mother of Student
Name		
Qualification		
Occupation (Tick Appropriate)	Govt. Service/Pvt. Service/ Entrepreneur/Business/ Professional / Others	Govt. Service/Pvt. Service/ Entrepreneur/Business/ Professional /home maker/ Others
Designation		
Annual Income (in Lakh)		
Mobile No.		
Email ID		

STUDENT QUALIFICATIONS DETAIL :

Exam Passed	Name of Board / University	Passing Year	Division	Full Marks	Marks Obtained	Per (%)
10 th						
12 th						
B.Tech (1 st Yr./ Diploma (if applicable)						
B.Tech./Graduation(if applicable)						
M.Tech/Post Graduation (if applicable)						

I certify that information given above is correct. In case it is found to be wrong, I am liable for disciplinary action.

DATE :

SIGNATURE OF STUDENT