



Application Form for Registration to Professional Examination B.Tech II-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: CIVIL

Please tick(√) the corresponding boxes:

6.Sex :

- Male Female

7.Social Status

- SC BC-A BC-B BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

9.Mobile Number +91

10.Permanent Address : PIN: E-mail:

11.Date Of Birth

12.Year of Appearing I II III IV V

13.Semester I II

14.Appearing as Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory 1-12 subject boxes

Practical 1-12 subject boxes

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech II-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

Three digit input boxes for College Code

2.RollNumber :

Eight digit input boxes for Roll Number

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

Twenty digit input boxes for Name

4.FATHER 'S NAME

Twenty digit input boxes for Father's Name

5.MOTHER 'S NAME

Twenty digit input boxes for Mother's Name

Please tick(√) the corresponding boxes:

6.Sex :

Male Female

7.Social Status

SC ST BC-A BC-B BC-C BC-D BC-E Others

8.Fee Paid Rs :

Four digit input boxes for Fee Paid

9.Mobile Number

+91 followed by ten digit input boxes for Mobile Number

11.Date Of Birth

Three digit input boxes for Date of Birth

10.Permanent Address :

Large text area for Permanent Address, PIN, and E-mail

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory section with 12 subject code input boxes

Practical section with 12 subject code input boxes

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Signature box for the principal

Full Signature of the principal within the box

Signature box for the student

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech II-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

Grid for College Code

2.RollNumber :

Grid for Roll Number

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

Grid for Name

4.FATHER 'S NAME

Grid for Father's Name

5.MOTHER 'S NAME

Grid for Mother's Name

COURSE: B.TECH

COMBINATION:

CSE

Please tick(√) the corresponding boxes:

6.Sex and 7.Social Status checkboxes

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs : Grid

10.Permanent Address : Grid

9.Mobile Number Grid

11.Date Of Birth Grid

PIN: Grid

E-mail: Grid

12.Year of Appearing checkboxes

13.Semester checkboxes

14.Appearing as checkboxes

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory subjects grid

Practical subjects grid

I herreby declare that all information furnished by the candidate is checked by me and found correct

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Signature box for principal

Full Signature of the principal within the box

Signature box for student

Full Signature of the Student within the box

Date:



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 2.RollNumber :

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3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4.FATHER 'S NAME

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5.MOTHER 'S NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please tick(√) the corresponding boxes:

6.Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>	7.Social Status SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/> BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/>
--	--

8.Fee Paid Rs :

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9.Mobile Number
+91

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11.Date Of Birth

--	--	--

10.Permanent Address :

PIN:

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E-mail:

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Paste the photograph(Black & White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

12.Year of Appearing I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/>	13.Semester I <input type="checkbox"/> II <input type="checkbox"/>	14.Appearing as Regular <input type="checkbox"/> External <input type="checkbox"/> Improvement <input type="checkbox"/>
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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				2 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				3 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				4 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				5 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				6 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>			
7 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				8 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				9 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				10 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				11 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				12 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				

Practical	1 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				2 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				3 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				4 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				5 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>				6 <table border="1" style="display: inline-table;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>			
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Full Signature of the principal within the box

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Full Signature of the Student within the box

Date:



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3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: ECE

Please tick(√) the corresponding boxes:

6.Sex :

Male
Female

7.Social Status

SC ST BC-A BC-B
BC-C BC-D BC-E Others

8.Fee Paid Rs :

9.Mobile Number

+91

11.Date Of Birth

10.Permanent Address :

PIN:

E-mail:

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory

1 2 3 4 5 6

7 8 9 10 11 12

Practical

1 2 3 4 5 6

7 8 9 10 11 12

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Please tick(✓) the corresponding boxes:

6.Sex :

Male

Female

7.Social Status

SC ST BC-A BC-B

BC-C BC-D BC-E Others

Paste the
photograph(Black
&White) inside the box
only.If required cut the
photograph to fit in the
box.
(PHOTO NOT TO BE
ATTESTED)

8.Fee Paid Rs :

9.Mobile Number

+91

11.Date Of Birth

10.Permanent Address :

PIN:

E-mail:

12.Year of Appearing

I II III IV V

13.Semester

I II

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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

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3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

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4.FATHER 'S NAME

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5.MOTHER 'S NAME

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Please tick(√) the corresponding boxes:

6.Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>	7.Social Status SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/> BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/>	Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)
8.Fee Paid Rs :	10.Permanent Address :	
9.Mobile Number +91		PIN:
11.Date Of Birth	E-mail:	

12.Year of Appearing I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/>	13.Semester I <input type="checkbox"/> II <input type="checkbox"/>	14.Appearing as Regular <input type="checkbox"/> External <input type="checkbox"/> Improvement <input type="checkbox"/>
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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<table border="1"><tr><td></td><td></td><td></td></tr></table>				2	<table border="1"><tr><td></td><td></td><td></td></tr></table>				3	<table border="1"><tr><td></td><td></td><td></td></tr></table>				4	<table border="1"><tr><td></td><td></td><td></td></tr></table>				5	<table border="1"><tr><td></td><td></td><td></td></tr></table>				6	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
7	<table border="1"><tr><td></td><td></td><td></td></tr></table>				8	<table border="1"><tr><td></td><td></td><td></td></tr></table>				9	<table border="1"><tr><td></td><td></td><td></td></tr></table>				10	<table border="1"><tr><td></td><td></td><td></td></tr></table>				11	<table border="1"><tr><td></td><td></td><td></td></tr></table>				12	<table border="1"><tr><td></td><td></td><td></td></tr></table>				

Practical	1	<table border="1"><tr><td></td><td></td><td></td></tr></table>				2	<table border="1"><tr><td></td><td></td><td></td></tr></table>				3	<table border="1"><tr><td></td><td></td><td></td></tr></table>				4	<table border="1"><tr><td></td><td></td><td></td></tr></table>				5	<table border="1"><tr><td></td><td></td><td></td></tr></table>				6	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
7	<table border="1"><tr><td></td><td></td><td></td></tr></table>				8	<table border="1"><tr><td></td><td></td><td></td></tr></table>				9	<table border="1"><tr><td></td><td></td><td></td></tr></table>				10	<table border="1"><tr><td></td><td></td><td></td></tr></table>				11	<table border="1"><tr><td></td><td></td><td></td></tr></table>				12	<table border="1"><tr><td></td><td></td><td></td></tr></table>				

I herreby declare that all information furnished by the candidate is checked by me and found correct

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Full Signature of the principal within the box

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Full Signature of the Student within the box

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to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: MECHANICAL

Please tick(✓) the corresponding boxes:

6.Sex :
 Male
 Female

7.Social Status
 SC ST BC-A BC-B
 BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
 (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

10.Permanent Address :

PIN:

E-mail:

9.Mobile Number

+91

11.Date Of Birth

12.Year of Appearing
 I II III IV V

13.Semester
 I II

14.Appearing as
 Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

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- Male
Female

7.Social Status

- SC ST BC-A BC-B
BC-C BC-D BC-E Others

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Theory	1	<input style="width: 20px; height: 20px;" type="text"/>	2	<input style="width: 20px; height: 20px;" type="text"/>	3	<input style="width: 20px; height: 20px;" type="text"/>	4	<input style="width: 20px; height: 20px;" type="text"/>	5	<input style="width: 20px; height: 20px;" type="text"/>	6	<input style="width: 20px; height: 20px;" type="text"/>
	7	<input style="width: 20px; height: 20px;" type="text"/>	8	<input style="width: 20px; height: 20px;" type="text"/>	9	<input style="width: 20px; height: 20px;" type="text"/>	10	<input style="width: 20px; height: 20px;" type="text"/>	11	<input style="width: 20px; height: 20px;" type="text"/>	12	<input style="width: 20px; height: 20px;" type="text"/>

Practical	1	<input style="width: 20px; height: 20px;" type="text"/>	2	<input style="width: 20px; height: 20px;" type="text"/>	3	<input style="width: 20px; height: 20px;" type="text"/>	4	<input style="width: 20px; height: 20px;" type="text"/>	5	<input style="width: 20px; height: 20px;" type="text"/>	6	<input style="width: 20px; height: 20px;" type="text"/>
	7	<input style="width: 20px; height: 20px;" type="text"/>	8	<input style="width: 20px; height: 20px;" type="text"/>	9	<input style="width: 20px; height: 20px;" type="text"/>	10	<input style="width: 20px; height: 20px;" type="text"/>	11	<input style="width: 20px; height: 20px;" type="text"/>	12	<input style="width: 20px; height: 20px;" type="text"/>

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Twenty empty boxes for Name

4.FATHER 'S NAME

Twenty empty boxes for Father's Name

5.MOTHER 'S NAME

Twenty empty boxes for Mother's Name

COURSE: B.TECH

COMBINATION:

MINING

Please tick(√) the corresponding boxes:

6.Sex :

Male Female

7.Social Status

SC ST BC-A BC-B BC-C BC-D BC-E Others

8.Fee Paid Rs :

Four empty boxes for Fee Paid

9.Mobile Number

+91 followed by ten empty boxes for Mobile Number

11.Date Of Birth

Three empty boxes for Date Of Birth

10.Permanent Address :

Large box for Permanent Address, PIN, and E-mail

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory section with 12 subject code boxes

Practical section with 12 subject code boxes

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Signature box for the principal

Full Signature of the principal within the box

Signature box for the student

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech II-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in:

1.College Code :

Form for College Code

2.RollNumber :

Form for Roll Number

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

Name entry boxes

4.FATHER 'S NAME

Father's name entry boxes

5.MOTHER 'S NAME

Mother's name entry boxes

Please tick(√) the corresponding boxes:

6.Sex :

Sex selection boxes (Male, Female)

7.Social Status

Social Status selection boxes (SC, ST, BC-A, BC-B, BC-C, BC-D, BC-E, Others)

Paste the photograph(Black & White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

Fee Paid entry boxes

10.Permanent Address :

Permanent Address and PIN entry boxes

9.Mobile Number

Mobile Number entry boxes

11.Date Of Birth

Date Of Birth entry boxes

E-mail:

E-mail entry box

12.Year of Appearing

Year of Appearing selection boxes (I, II, III, IV, V)

13.Semester

Semester selection boxes (I, II)

14.Appearing as

Appearing as selection boxes (Regular, External, Improvement)

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory subjects entry boxes

Practical subjects entry boxes

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Signature box for principal

Full Signature of the principal within the box

Signature box for student

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech II-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

--	--	--	--

2.RollNumber :

--	--	--	--	--	--	--	--	--	--	--	--	--	--

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4.FATHER 'S NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5.MOTHER 'S NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

COURSE: **B.TECH** COMBINATION: PRODUCTION

Please tick(√) the corresponding boxes:

6.Sex :		7.Social Status			
Male <input type="checkbox"/>	Female <input type="checkbox"/>	SC <input type="checkbox"/>	ST <input type="checkbox"/>	BC-A <input type="checkbox"/>	BC-B <input type="checkbox"/>
		BC-C <input type="checkbox"/>	BC-D <input type="checkbox"/>	BC-E <input type="checkbox"/>	Others <input type="checkbox"/>

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

--	--	--	--	--	--

9.Mobile Number

+91															
-----	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

10.Permanent Address :

PIN:

--	--	--	--	--	--

E-mail:

--	--	--	--	--	--	--	--	--	--

11.Date Of Birth

--	--	--	--

<p>12.Year of Appearing</p> <p>I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/></p>	<p>13.Semester</p> <p>I <input type="checkbox"/> II <input type="checkbox"/></p>	<p>14.Appearing as</p> <p>Regular <input type="checkbox"/> External <input type="checkbox"/> Improvement <input type="checkbox"/></p>
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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					2	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					3	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					4	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					5	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					6	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>				
7	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					8	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					9	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					10	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					11	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					12	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					
Practical	1	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					2	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					3	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					4	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					5	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					6	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>				
7	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					8	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					9	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					10	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					11	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					12	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					

I herreby declare that all information furnished by the candidate is checked by me and found correct

Full Signature of the principal within the box

Date:

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the Student within the box



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

Grid for College Code

2.RollNumber :

Grid for Roll Number

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

Grid for Name

4.FATHER 'S NAME

Grid for Father's Name

5.MOTHER 'S NAME

Grid for Mother's Name

Please tick(√) the corresponding boxes:

6.Sex :

Male Female

7.Social Status

SC ST BC-A BC-B BC-C BC-D BC-E Others

8.Fee Paid Rs :

Grid for Fee Paid

9.Mobile Number

+91 Grid for Mobile Number

11.Date Of Birth

Grid for Date of Birth

10.Permanent Address :

Large grid for Permanent Address

PIN:

Grid for PIN

E-mail:

Grid for E-mail

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory

Grid for Theory Subjects (1-12)

Practical

Grid for Practical Subjects (1-12)

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: CSE

Please tick(√) the corresponding boxes:

6.Sex : Male Female 7.Social Status SC ST BC-A BC-B BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

10.Permanent Address : PIN: E-mail:

9.Mobile Number +91

11.Date Of Birth

12.Year of Appearing I II III IV V

13.Semester I II

14.Appearing as Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory 1 2 3 4 5 6 7 8 9 10 11 12

Practical 1 2 3 4 5 6 7 8 9 10 11 12

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

Please tick(✓) the corresponding boxes:

6.Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>	7.Social Status SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/> BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/>			
--	--	--	--	--

8.Fee Paid Rs :

9.Mobile Number
 +91

11.Date Of Birth

10.Permanent Address :

PIN:

E-mail:

Paste the
 photograph(Black
 &White) inside the box
 only.If required cut the
 photograph to fit in the
 box.
 (PHOTO NOT TO BE
 ATTESTED)

12.Year of Appearing
 I II III IV V

13.Semester
 I II

14.Appearing as
 Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

Three empty boxes for College Code

2.RollNumber :

Eight empty boxes for Roll Number

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

Twenty empty boxes for Name

4.FATHER 'S NAME

Twenty empty boxes for Father's Name

5.MOTHER 'S NAME

Twenty empty boxes for Mother's Name

COURSE: B.TECH

COMBINATION:

E&I

Please tick(√) the corresponding boxes:

6.Sex :

Male Female

7.Social Status

SC ST BC-A BC-B
BC-C BC-D BC-E Others

8.Fee Paid Rs :

Three empty boxes for Fee Paid Rs

9.Mobile Number

+91 followed by ten empty boxes for Mobile Number

11.Date Of Birth

Three empty boxes for Date Of Birth

10.Permanent Address :

Large box for Permanent Address with PIN and E-mail fields

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory section with 12 subject code boxes

Practical section with 12 subject code boxes

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Signature box for the principal

Full Signature of the principal within the box

Signature box for the student

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

Please tick(✓) the corresponding boxes:

6.Sex :
Male
Female
7.Social Status
SC ST BC-A BC-B
BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

10.Permanent Address :
PIN:
E-mail:

9.Mobile Number
+91

11.Date Of Birth

12.Year of Appearing
I II III IV V

13.Semester
I II

14.Appearing as
Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: ECE

Please tick(✓) the corresponding boxes:

6.Sex : Male [] Female []
7.Social Status SC [] ST [] BC-A [] BC-B [] BC-C [] BC-D [] BC-E [] Others []

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

9.Mobile Number +91

10.Permanent Address :
PIN:
E-mail:

11.Date Of Birth

12.Year of Appearing I [] II [] III [] IV [] V []

13.Semester I [] II []

14.Appearing as Regular [] External [] Improvement []

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory 1 2 3 4 5 6 7 8 9 10 11 12

Practical 1 2 3 4 5 6 7 8 9 10 11 12

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date: _____



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

Grid for College Code

2.RollNumber :

Grid for Roll Number

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

Grid for Name

4.FATHER 'S NAME

Grid for Father's Name

5.MOTHER 'S NAME

Grid for Mother's Name

COURSE: B.TECH

COMBINATION:

EEE

Please tick(√) the corresponding boxes:

6.Sex :

Sex selection boxes: Male, Female

7.Social Status

Social Status selection boxes: SC, ST, BC-A, BC-B, BC-C, BC-D, BC-E, Others

8.Fee Paid Rs :

Grid for Fee Paid

9.Mobile Number

Grid for Mobile Number

10.Permanent Address :

Large grid for Permanent Address

PIN:

Grid for PIN

11.Date Of Birth

Grid for Date of Birth

E-mail:

Grid for E-mail

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

Year of Appearing selection boxes: I, II, III, IV, V

13.Semester

Semester selection boxes: I, II

14.Appearing as

Appearing as selection boxes: Regular, External, Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Grid for Theory Subjects (1-12)

Grid for Practical Subjects (1-12)

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Signature box for Principal

Full Signature of the principal within the box

Signature box for Student

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

Please tick(✓) the corresponding boxes:

<p>6.Sex :</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p>	<p>7.Social Status</p> <p>SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/></p> <p>BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/></p>
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Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

9.Mobile Number

+91

11.Date Of Birth

10.Permanent Address :

PIN:

E-mail:

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

Please tick(✓) the corresponding boxes:

6.Sex :

Male
Female

7.Social Status

SC ST BC-A BC-B
BC-C BC-D BC-E Others

8.Fee Paid Rs :

9.Mobile Number

+91

11.Date Of Birth

10.Permanent Address :

PIN:
E-mail:

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

I herreby declare that all information furnished by the candidate is checked by me and found correct

I hereby declare that information furnished above to best of my knowledge in the event of any information being found incorrect or misleading.my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund any fee paid by me to the University.

Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: **B.TECH** COMBINATION: **MECHANICAL**

Please tick(√) the corresponding boxes:

<p>6.Sex :</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p>	<p>7.Social Status</p>			
	<p>SC <input type="checkbox"/></p> <p>BC-C <input type="checkbox"/></p>	<p>ST <input type="checkbox"/></p> <p>BC-D <input type="checkbox"/></p>	<p>BC-A <input type="checkbox"/></p> <p>BC-E <input type="checkbox"/></p>	<p>BC-B <input type="checkbox"/></p> <p>Others <input type="checkbox"/></p>

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

10.Permanent Address :

PIN:

E-mail:

9.Mobile Number

+91

11.Date Of Birth

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1 <input type="text"/>	2 <input type="text"/>	3 <input type="text"/>	4 <input type="text"/>	5 <input type="text"/>	6 <input type="text"/>
	7 <input type="text"/>	8 <input type="text"/>	9 <input type="text"/>	10 <input type="text"/>	11 <input type="text"/>	12 <input type="text"/>

Practical	1 <input type="text"/>	2 <input type="text"/>	3 <input type="text"/>	4 <input type="text"/>	5 <input type="text"/>	6 <input type="text"/>
	7 <input type="text"/>	8 <input type="text"/>	9 <input type="text"/>	10 <input type="text"/>	11 <input type="text"/>	12 <input type="text"/>

I herreby declare that all information furnished by the candidate is checked by me and found correct

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Full Signature of the principal within the box

Full Signature of the Student within the box

Date:



Application Form for Registration to Professional Examination B.Tech III-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: MINING

Please tick(√) the corresponding boxes:

6.Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>	7.Social Status			
	SC <input type="checkbox"/>	ST <input type="checkbox"/>	BC-A <input type="checkbox"/>	BC-B <input type="checkbox"/>
	BC-C <input type="checkbox"/>	BC-D <input type="checkbox"/>	BC-E <input type="checkbox"/>	Others <input type="checkbox"/>

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
 (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

10.Permanent Address :

 PIN:
 E-mail:

9.Mobile Number
 +91

11.Date Of Birth

12.Year of Appearing I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/>	13.Semester I <input type="checkbox"/> II <input type="checkbox"/>	14.Appearing as Regular <input type="checkbox"/> External <input type="checkbox"/> Improvement <input type="checkbox"/>
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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/> <input type="text"/> <input type="text"/>	2	<input type="text"/> <input type="text"/> <input type="text"/>	3	<input type="text"/> <input type="text"/> <input type="text"/>	4	<input type="text"/> <input type="text"/> <input type="text"/>	5	<input type="text"/> <input type="text"/> <input type="text"/>	6	<input type="text"/> <input type="text"/> <input type="text"/>
	7	<input type="text"/> <input type="text"/> <input type="text"/>	8	<input type="text"/> <input type="text"/> <input type="text"/>	9	<input type="text"/> <input type="text"/> <input type="text"/>	10	<input type="text"/> <input type="text"/> <input type="text"/>	11	<input type="text"/> <input type="text"/> <input type="text"/>	12	<input type="text"/> <input type="text"/> <input type="text"/>

Practical	1	<input type="text"/> <input type="text"/> <input type="text"/>	2	<input type="text"/> <input type="text"/> <input type="text"/>	3	<input type="text"/> <input type="text"/> <input type="text"/>	4	<input type="text"/> <input type="text"/> <input type="text"/>	5	<input type="text"/> <input type="text"/> <input type="text"/>	6	<input type="text"/> <input type="text"/> <input type="text"/>
	7	<input type="text"/> <input type="text"/> <input type="text"/>	8	<input type="text"/> <input type="text"/> <input type="text"/>	9	<input type="text"/> <input type="text"/> <input type="text"/>	10	<input type="text"/> <input type="text"/> <input type="text"/>	11	<input type="text"/> <input type="text"/> <input type="text"/>	12	<input type="text"/> <input type="text"/> <input type="text"/>

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2.RollNumber :

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4.FATHER 'S NAME

5.MOTHER 'S NAME

Please tick(√) the corresponding boxes:

6.Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>	7.Social Status SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/> BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/>
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(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

9.Mobile Number
+91

11.Date Of Birth

10.Permanent Address :

PIN:

E-mail:

12.Year of Appearing
I II III IV V

13.Semester
I II

14.Appearing as
Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

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3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: PRODUCTION

Please tick(√) the corresponding boxes:

<p>6.Sex :</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p>	<p>7.Social Status</p> <p>SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/></p> <p>BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/></p>
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(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

9.Mobile Number

+91

11.Date Of Birth

10.Permanent Address :

PIN:

E-mail:

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

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4.FATHER 'S NAME

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5.MOTHER 'S NAME

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COURSE: B.TECH

COMBINATION:

CIVIL

Please tick(✓) the corresponding boxes:

6.Sex :

Male
Female

7.Social Status

SC ST BC-A BC-B
BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

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9.Mobile Number

+91																						
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10.Permanent Address :

PIN:

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E-mail:

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11.Date Of Birth

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12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxes given below.Please see leaflet for filling codes)

Theory

1	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					2	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					3	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					4	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					5	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					6	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
7	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					8	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					9	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					10	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					11	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					12	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				

Practical

1	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					2	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					3	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					4	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					5	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					6	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
7	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					8	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					9	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					10	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					11	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					12	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				

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Full Signature of the Student within the box

Date:



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to be held in: _____

1.College Code :

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2.RollNumber :

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3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

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4.FATHER 'S NAME

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5.MOTHER 'S NAME

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Please tick(✓) the corresponding boxes:

6.Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>	7.Social Status SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/> BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/>
--	--

<i>Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)</i>
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8.Fee Paid Rs :

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9.Mobile Number
+91

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11.Date Of Birth

--	--	--

10.Permanent Address :

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

PIN:

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E-mail:

--	--	--	--	--	--	--	--	--	--

12.Year of Appearing
I II III IV V

13.Semester
I II

14.Appearing as
Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<table border="1"><tr><td></td><td></td><td></td></tr></table>				2	<table border="1"><tr><td></td><td></td><td></td></tr></table>				3	<table border="1"><tr><td></td><td></td><td></td></tr></table>				4	<table border="1"><tr><td></td><td></td><td></td></tr></table>				5	<table border="1"><tr><td></td><td></td><td></td></tr></table>				6	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
7	<table border="1"><tr><td></td><td></td><td></td></tr></table>				8	<table border="1"><tr><td></td><td></td><td></td></tr></table>				9	<table border="1"><tr><td></td><td></td><td></td></tr></table>				10	<table border="1"><tr><td></td><td></td><td></td></tr></table>				11	<table border="1"><tr><td></td><td></td><td></td></tr></table>				12	<table border="1"><tr><td></td><td></td><td></td></tr></table>				

Practical	1	<table border="1"><tr><td></td><td></td><td></td></tr></table>				2	<table border="1"><tr><td></td><td></td><td></td></tr></table>				3	<table border="1"><tr><td></td><td></td><td></td></tr></table>				4	<table border="1"><tr><td></td><td></td><td></td></tr></table>				5	<table border="1"><tr><td></td><td></td><td></td></tr></table>				6	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
7	<table border="1"><tr><td></td><td></td><td></td></tr></table>				8	<table border="1"><tr><td></td><td></td><td></td></tr></table>				9	<table border="1"><tr><td></td><td></td><td></td></tr></table>				10	<table border="1"><tr><td></td><td></td><td></td></tr></table>				11	<table border="1"><tr><td></td><td></td><td></td></tr></table>				12	<table border="1"><tr><td></td><td></td><td></td></tr></table>				

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--

Full Signature of the principal within the box

--

Full Signature of the Student within the box

Date:



to be held in: _____

1.College Code :

2.RollNumber :

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: E&I

Please tick(√) the corresponding boxes:

6.Sex :
Male
Female

7.Social Status
SC ST BC-A BC-B
BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

9.Mobile Number
+91

11.Date Of Birth

10.Permanent Address :

PIN:
E-mail:

12.Year of Appearing
I II III IV V

13.Semester
I II

14.Appearing as
Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory
1 2 3 4 5 6
7 8 9 10 11 12

Practical
1 2 3 4 5 6
7 8 9 10 11 12

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3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH

COMBINATION:

ECE

Please tick(✓) the corresponding boxes:

6.Sex :

Male
Female

7.Social Status

SC ST BC-A BC-B
BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
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8.Fee Paid Rs :

10.Permanent Address :

9.Mobile Number

+91

PIN:

11.Date Of Birth

E-mail:

12.Year of Appearing

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13.Semester

I II

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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

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Grid for College Code

2.RollNumber :

Grid for Roll Number

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

Grid for Name

4.FATHER 'S NAME

Grid for Father's Name

5.MOTHER 'S NAME

Grid for Mother's Name

Please tick(✓) the corresponding boxes:

6.Sex :

Male Female

7.Social Status

SC ST BC-A BC-B BC-C BC-D BC-E Others

8.Fee Paid Rs :

Grid for Fee Paid

9.Mobile Number

+91 Grid for Mobile Number

11.Date Of Birth

Grid for Date of Birth

10.Permanent Address :

Grid for Permanent Address, PIN, and E-mail

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

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Grid for Theory Subjects (1-12)

Grid for Practical Subjects (1-12)

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Signature box for Principal

Full Signature of the principal within the box

Signature box for Student

Full Signature of the Student within the box

Date:



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to be held in: _____

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2.RollNumber :

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4.FATHER 'S NAME

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5.MOTHER 'S NAME

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COURSE: B.TECH

COMBINATION:

EEE

Please tick(√) the corresponding boxes:

6.Sex :

Male

Female

7.Social Status

SC ST BC-A BC-B

BC-C BC-D BC-E Others

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

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9.Mobile Number

+91

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11.Date Of Birth

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E-mail:

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12.Year of Appearing

I II III IV V

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I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<table border="1"><tr><td></td><td></td><td></td></tr></table>				2	<table border="1"><tr><td></td><td></td><td></td></tr></table>				3	<table border="1"><tr><td></td><td></td><td></td></tr></table>				4	<table border="1"><tr><td></td><td></td><td></td></tr></table>				5	<table border="1"><tr><td></td><td></td><td></td></tr></table>				6	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
7	<table border="1"><tr><td></td><td></td><td></td></tr></table>				8	<table border="1"><tr><td></td><td></td><td></td></tr></table>				9	<table border="1"><tr><td></td><td></td><td></td></tr></table>				10	<table border="1"><tr><td></td><td></td><td></td></tr></table>				11	<table border="1"><tr><td></td><td></td><td></td></tr></table>				12	<table border="1"><tr><td></td><td></td><td></td></tr></table>				

Practical	1	<table border="1"><tr><td></td><td></td><td></td></tr></table>				2	<table border="1"><tr><td></td><td></td><td></td></tr></table>				3	<table border="1"><tr><td></td><td></td><td></td></tr></table>				4	<table border="1"><tr><td></td><td></td><td></td></tr></table>				5	<table border="1"><tr><td></td><td></td><td></td></tr></table>				6	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
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Full Signature of the principal within the box
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Full Signature of the Student within the box
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Date:



Application Form for Registration to Professional Examination B.Tech IV-Year II-Semester (Reg&Ex,Imp)Examinations MAR-2018

to be held in: _____

1.College Code :

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2.RollNumber :

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3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4.FATHER 'S NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5.MOTHER 'S NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please tick(√) the corresponding boxes:

6.Sex : Male <input type="checkbox"/> Female <input type="checkbox"/>	7.Social Status SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/> BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/>
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Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box.
(PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs :

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10.Permanent Address :

PIN:

--	--	--	--	--	--

E-mail:

--	--	--	--	--	--	--	--	--	--

9.Mobile Number

+91

--	--	--	--	--	--	--	--	--	--	--	--	--

11.Date Of Birth

--	--	--

<p>12.Year of Appearing</p> <p>I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/></p>	<p>13.Semester</p> <p>I <input type="checkbox"/> II <input type="checkbox"/></p>	<p>14.Appearing as</p> <p>Regular <input type="checkbox"/> External <input type="checkbox"/> Improvement <input type="checkbox"/></p>
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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory	1	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				2	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				3	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				4	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				5	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				6	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
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Practical	1	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				2	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				3	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				4	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				5	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				6	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
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Full Signature of the principal within the box

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Full Signature of the Student within the box

Date:



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to be held in: _____

1.College Code : [] [] [] [] 2.RollNumber : [] [] [] [] [] [] [] [] [] [] [] [] [] [] []

3.NAME (As Per the qualifying examination certificate) (Please fill in the boxes with CAPITAL letters)

4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH COMBINATION: IT

Please tick(√) the corresponding boxes:

6.Sex : Male [] Female [] 7.Social Status SC [] ST [] BC-A [] BC-B [] BC-C [] BC-D [] BC-E [] Others []

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

8.Fee Paid Rs : [] [] [] [] 9.Mobile Number +91 [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] 10.Permanent Address : PIN: [] [] [] [] [] [] 11.Date Of Birth [] [] [] [] E-mail: [] [] [] [] [] [] [] [] [] [] [] []

12.Year of Appearing I [] II [] III [] IV [] V [] 13.Semester I [] II [] 14.Appearing as Regular [] External [] Improvement []

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Theory Practical 1 [] [] [] 2 [] [] [] 3 [] [] [] 4 [] [] [] 5 [] [] [] 6 [] [] [] 7 [] [] [] 8 [] [] [] 9 [] [] [] 10 [] [] [] 11 [] [] [] 12 [] [] []

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Grid for Name

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Grid for Father's Name

5.MOTHER 'S NAME

Grid for Mother's Name

Please tick(√) the corresponding boxes:

6.Sex :

Male Female

7.Social Status

SC ST BC-A BC-B BC-C BC-D BC-E Others

8.Fee Paid Rs :

Grid for Fee Paid

9.Mobile Number

+91 Grid for Mobile Number

11.Date Of Birth

Grid for Date of Birth

10.Permanent Address :

Large box for Permanent Address

PIN:

Grid for PIN

E-mail:

Grid for E-mail

Paste the photograph(Black &White) inside the box only.If required cut the photograph to fit in the box. (PHOTO NOT TO BE ATTESTED)

12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

Regular External Improvement

15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory

Grid for Theory Subjects (1-12)

Practical

Grid for Practical Subjects (1-12)

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4.FATHER 'S NAME

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5.MOTHER 'S NAME

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Please tick(√) the corresponding boxes:

<p>6.Sex :</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p>	<p>7.Social Status</p> <p>SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/></p> <p>BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Others <input type="checkbox"/></p>
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9.Mobile Number

+91									
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Grid for Name

4.FATHER 'S NAME

Grid for Father's Name

5.MOTHER 'S NAME

Grid for Mother's Name

COURSE: B.TECH

COMBINATION:

MINING

Please tick(√) the corresponding boxes:

6.Sex :

Male Female

7.Social Status

SC ST BC-A BC-B BC-C BC-D BC-E Others

8.Fee Paid Rs :

Grid for Fee Paid

9.Mobile Number

+91 Grid for Mobile Number

11.Date Of Birth

Grid for Date of Birth

10.Permanent Address :

Large box for Permanent Address, PIN, and E-mail

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12.Year of Appearing

I II III IV V

13.Semester

I II

14.Appearing as

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15. Subjects(Papers)Appearing:(Please write corresponding subject code in CAPITAL in the boxesgiven below.Please see leaflet for filling codes)

Theory subjects grid (1-12)

Practical subjects grid (1-12)

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Signature box for principal

Full Signature of the principal within the box

Signature box for student

Full Signature of the Student within the box

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Grid for Theory Subjects (1-12)

Practical

Grid for Practical Subjects (1-12)

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4.FATHER 'S NAME

5.MOTHER 'S NAME

COURSE: B.TECH

COMBINATION:

PRODUCTION

Please tick(✓) the corresponding boxes:

6.Sex :

7.Social Status

8.Fee Paid Rs :

9.Mobile Number

10.Permanent Address :

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PIN:

E-mail:

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	7		8		9		10		11		12	

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6.Sex :

Male
Female

7.Social Status

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Theory	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
	7	<input type="text"/>	8	<input type="text"/>	9	<input type="text"/>	10	<input type="text"/>	11	<input type="text"/>	12	<input type="text"/>

Practical	1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>
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