

# KOTIBARSHA INSTITUTE OF TECHNOLOGY AND MANAGEMENT



## ADMISSION FORM

UNDER MOULANA ABUL KALAM AZAD UNIVERSITY OF TECHNOLOGY, WEST BENGAL

COURSE APPLIED FOR :

Paste Passport  
Size Colour  
Photo

Name Of The Candidate : \_\_\_\_\_

Date Of Birth : \_\_\_/\_\_\_/\_\_\_\_\_

Gender: Male  / Female

Nationality : \_\_\_\_\_

Religion : \_\_\_\_\_

Caste : General  / S.C.  / S.T.  / O.B.C. (A)  / O.B.C. (B)

Father's Name : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Full Postal Address of Candidate : \_\_\_\_\_

\_\_\_\_\_ Pin Code: \_\_\_\_\_

Mobile No (C) : \_\_\_\_\_ Mobile No (G) : \_\_\_\_\_

### EDUCATIONAL BACKGROUND

EXAMINATION	UNIVERSITY/ BOARD	SUBJECTS	PERSENTAGE	PASSING YEAR
MADHYAMIK(10 <sup>TH</sup> )				
HIGHER SECONDARY (10+2)				
GRADUATION				
OTHERS				

I, \_\_\_\_\_ hereby solemnly affirm that the statements made and the information furnished in the application form, as also in all enclosures thereto, submitted by me are true. If the information furnished therein is false, I am liable to criminal prosecution and forfeiture of my seat. I hereby agree to abide by the rules and regulations of the institutes, if admitted.

Place : \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Candidate : \_\_\_\_\_

I, \_\_\_\_\_ have no objection in my ward \_\_\_\_\_ joining the course of study and I endorse the statements furnished by him/ her. I agree to pay the tuition fees of the college and Registration fees / Examination Fees of University as per required schedule.

Place : \_\_\_\_\_

Date: \_\_\_\_\_

Signature of the Guardian : \_\_\_\_\_

COUNTER PART SHOULD BE KEEP BY STUDENT / CANDIDATE

Name of Student : \_\_\_\_\_ Applied For : \_\_\_\_\_

Signature Of The Authorised Person: \_\_\_\_\_