

For office use only

SID No.

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Form No. _____

UID No. _____



BELLS INSTITUTE OF MANAGEMENT & TECHNOLOGY

APPLICATION FORM FOR NEW ADMISSION

SESSION _____

Complete Application Form, filled in by the student alongwith requisite fee & copies of testimonials/certificates must reach the office on or before the last date.

Fill in the complete form in CAPITAL LETTERS using blue ink only (choose one course only)

Course applied	Fee Details			Name of Bank & Address
	DD No. / Bank Challan / Cash	Date	Amount	
Entrance Test(s) appeared :		All India Rank :		State Rank :

Affix latest passport size photograph duly signed by you

1. Student's Name _____ Mobile _____
(as in matriculation)

2. (a) Father's Name _____ Mobile _____

(b) Mother's Name _____ Mobile _____

3. Permanent Address _____

_____ Pin Code _____

Email : _____ Tel. (with STD) _____

4. DOB (as in matriculation) Day

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 Month

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 Year

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 5. Aadhar Card Number

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6. Gender M/F _____ 7. Blood Group _____ 8. Transport Req'd.Y/N _____ 9. Hostel Req'd.Y/N _____

10. Nationality _____ 11. Domicile _____ 12. Religion _____

13. Category _____ 14. Sub-Category _____ 15. Minority Y/N _____

16. Physically Handicapped Y/N _____ 17. Annual Family Income (Rs.) _____

18. Details of sibling studying in campus : Course _____ SID No. _____

19. Scholarship Name (if applied) _____ Amount p.a. _____

20. Educational Qualifications :

(a) Matriculation	School :	Year of Passing :	Max Marks :
	Board :	Roll No. :	Marks Obt. :
(b) 10+2 or equivalent	Stream :	Year of Passing :	Max Marks :
	School /Board :	Roll No. :	Marks Obt. :
(c) Graduation	Course :	Year of Passing :	Max Marks :
	College /University :	Roll No. :	Marks Obt. :
(d) Other		Year of Passing :	Max Marks :
		Roll No. :	Marks Obt. :

21. Have you ever been disqualified by any University / Board from appearing in any examination?

If yes, give details _____

22. Father's Occupational Details :

Organization with Address _____

Aadhar Card No. _____ Tel. (with STD) _____

Designation _____ Department _____ Working Since _____

23. Mother's Occupational Details :

Organization with Address _____

Aadhar Card No. _____ Tel. (with STD) _____

Designation _____ Department _____ Working Since _____

24. List of enclosures :

Fee Receipt / Demand Draft		Category Certificate (In Original)	
Four Passport Size Photographs		Income Certificate (In Original)	
Matric Date of Birth Certificate & DMC		DTE/HPU/HPTU Advice Sheet	
10+2 Detail Marks Certificate		Migration Certificate (In Original)	
ITI / Polytechnic Diploma & DMC		Character Certificate (In Original)	
Graduation DMC & Degree		Aadhar Card	
JEE/CAT/MAT/CMAT/PG Result Card		Other -	
Bonafide / Domicile Certificate		Other -	

25. How did you come to know about our college / course _____

26. Have you been referred by any student / staff member :

Student Name _____ Name _____

Course _____ Designation _____

Mobile _____ Mobile _____

Declaration by the Applicant/Guardian

I hereby declare that I have read and understood the conditions of eligibility for the course for which I am enrolling / promoting. I fulfill minimum eligibility criteria as per norms of affiliating university / technical board on the date of taking admission. I have read and understood all the terms and conditions laid in the prospectus. I understand that the fee paid by me is not refundable. In case of my non eligibility to the course, I will not be entitled to refund the fee paid by me. I will separately fill the registration / examination / prospectus form of the affiliating university / technical board alongwith requisite fee and original qualifying certificates before the due date. I will collect all the necessary information about the course, date sheet for internal & external examinations, result, time table for classes, study materials, DMCs / Degree, and all the necessary correspondence myself from the college. That I will not indulge in ragging, eve teasing etc. I agree to abide by the rules & regulations (amended from time to time) of the college / affiliating university / technical board. I further undertake that all the information provided in this application form is true and correct and my candidature is liable to be cancelled in case of any default in the aforesaid.

Place :

Date : (Signature of Parent/Guardian)

(Signature of Candidate)

(For Office Use)
Received by : _____
Principal/Dean/HOD
