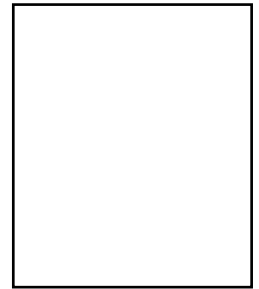




APPLICATION FORM FOR ADMISSION

Note : Fill in all the fields in Capital Letters only

Course :



	<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>
Name :	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father's Name :	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother's Name :	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth :	<input type="text"/>	Nationality :	<input type="text"/>
Gender :	<input type="text"/>	Religion :	<input type="text"/>
Category :	<input type="text"/>	Physically Challenged :	<input type="text"/>
Present Address :	<input type="text"/>		Pin : <input type="text"/>
			City : <input type="text"/>
Email :	<input type="text"/>	State :	<input type="text"/>
Mobile :	<input type="text"/>	Phone :	<input type="text"/>
Permanent Address :	<input type="text"/>		Pin : <input type="text"/>
			City : <input type="text"/>
Email :	<input type="text"/>	State :	<input type="text"/>
Guardian Mobile :	<input type="text"/>	Phone :	<input type="text"/>

Name of School/College : City :

Address : Country :

TICK APPROPRIATE

- | | |
|---|--|
| <input type="checkbox"/> 10th admit card (attested) | <input type="checkbox"/> 10th marksheet (attested) |
| <input type="checkbox"/> 10+2 admit card (attested) | <input type="checkbox"/> 10+2 marksheet (attested) |

DECLARATION BY APPLICANT

I Son / daughter of
 am seeking admission to
 Course affiliated to
 University. I hereby declare that all facts stated are true to
 my knowledge. I agree to abide by the rules and regulations set by **PITM**.

Date :

Place :

Signature of Candidate