



# APIIT SD INDIA PANIPAT

Toll Plaza, G. T. Road, Panipat-132103 , Haryana (INDIA)

Application Form for Admission to  
B.Tech and BBA / MBA

Instructions: 1. Please read the Information Brochure carefully before filling each column of the Application Form.  
2. No Column should be left blank, write N.A. if not applicable

Roll No <input type="text"/>	Name of the Branch Under Graduates applied for (Tick)	Name of the Branch Masters applied for (Tick)
All India Rank (JEE) <input type="text"/>	<input type="checkbox"/> Mechatronics Engineering <input type="checkbox"/> Electrical And Electronic Engineering <input type="checkbox"/> Computer Science & Engineering <input type="checkbox"/> BBA	<input type="checkbox"/> MBA
State all India Rank (JEE) <input type="text"/>	Branch Allotted:	

Name in Full	<input type="text"/>	<input type="text"/>	<input type="text"/>	Paste your photo here
	First Name	Middle Name	Surname	
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	Month	Day	Year	
	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="text"/>	Nationality
Father's Name	<input type="text"/>		Mother's Name	<input type="text"/>

Category	Physical Handicapped	Religion	Minority Community	Domicile	Region
<input type="checkbox"/> SC <input type="checkbox"/> OBC <input type="checkbox"/> ST <input type="checkbox"/> General	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Hindu <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Christian <input type="checkbox"/> Jain <input type="checkbox"/> Buddhist	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Rural <input type="checkbox"/> Urban

CORRESPONDENCE ADDRESS	PERMANENT ADDRESS
Address :- <input type="text"/>	Address :- <input type="text"/>
State <input type="text"/> Pin Code <input type="text"/>	State <input type="text"/> Pin Code <input type="text"/>
Phone No. (With STD Code) <input type="text"/>	Phone No. (With STD Code) <input type="text"/>
Mobile No (Student) : <input type="text"/>	Mobile No (Student) : <input type="text"/>
Email id (Student) : <input type="text"/>	Email id (Student) : <input type="text"/>

### Details of Examinations Passed

Examination	Exam Roll No.	Board	Year of Passing	Marks Obtained	Maximum Marks	% age (Aggregate)	%age (PCM)
10th /Matriculation							
10+2/Intermediate							
Diploma							
Degree							
Any other							

## UNDERTAKING

(a) I declare that I have not been debarred from joining any educational Institution or rusticated from the Institution /University /Board last attended.

(b) I declare that all the statements made in this application are true to the best of my knowledge and belief. I clearly understand that if any of the statement is subsequently found to be untrue, my admission to the above said course would stand cancelled. (c) I have satisfied myself that I fulfill the minimum educational qualification and that my admission be treated as cancelled, if found deficient in these statements. (d) I agree that admission may be granted to me on terms and conditions stated in the Information Brochure of the HSBEB or such modification there of as may be made by the authorities. (e) I promise to abide by the rules and regulations of the college as applicable from time to time.

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

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

Signature of the student

### Parent's Particulars:

Name: Father / Mother	
Qualification:	Occupation:-
Designation:	Annual Income:-
Organization Address:	
Pin Code:	State
Office Phone No-	

### Declaration

Certified that all the entries made in this form are correct. I also certify that in case my Son / Daughter / Ward is admitted,  
I undertake that I shall make all the payments in stipulated time as laid down by the College.

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

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

Signature of Parent / Guardian

### Check list of attested photocopies of Documents attached

- 10th/Matriculation Certificate with Date of Birth
- 10+2/Intermediate Marks Certificate
- Diploma/Degree Certificate
- Diploma /Degree Detailed Marks Certificate
- Migration Certificate
- Medical Certificate     Character Certificate     Reservation Certificate (if any)
- Other (if any, please specify) \_\_\_\_\_
- Demand Draft of Rs. 700/- in favour of "APIIT SD INDIA", Payable at Panipat
- Undertaking as per Regulations by  Applicant  Parent / Guardian

For Office Use Only	Application Duly completed in all respects to be submitted to
<input type="checkbox"/> Eligible <input type="checkbox"/> Not Eligible	Chairman
<input type="checkbox"/> Admitted to B.Tech and BBA / MBA	Admission Committee
Date.....	APIIT SD INDIA PANIPAT
Admission Committee	Toll Plaza, G. T. Road, Panipat-132103 , Haryana (INDIA)
	Ph. +91 180 6532444, 6532555
	E-mail: info@apiit.edu.in, apiitsdindia@rediffmail.com
	Website: www.apiit.edu.in

Note: - Incomplete Application will be summarily rejected without assigning any reason

# ATTESTATION FORM-A

Application No. \_\_\_\_\_

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

Name : \_\_\_\_\_

Correspondence Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ PIN 

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Photograph may be scanned, hence ensure good quality photograph and proper pasting. Do not stamp the photograph.

OFFICE COPY  
(TO BE FILLED BY THE CANDIDATE)

Affix your latest passport size photograph of 4.5 cm x 3.5 cm. size

For Office Use  
  
Roll No.

Form A

# ATTESTATION FORM-B

FOR USE BY APIIT AT THE TEST CENTERS  
FOR VERIFICATION OF THE CANDIDATE  
(TO BE FILLED BY THE CANDIDATE)

Application No. \_\_\_\_\_

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

Name : \_\_\_\_\_

Correspondence Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ PIN 

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Affix your latest passport size photograph of 4.5 cm x 3.5 cm. size

APIIT  
SEAL ONLY

For Office Use  
  
Roll No.

Form B

# ACKNOWLEDGMENT CARD / FORM-C



APIIT SD India, Faridpur Road, Panipat (Haryana) 132 103  
(To be filled by the Candidate)

Application No. \_\_\_\_\_

Name of Candidate : \_\_\_\_\_

(To be filled by APIIT-SD INDIA)

Received on \_\_\_\_\_  
\_\_\_\_\_

For Office Use  
  
Roll No.

THIS ACKNOWLEDGMENT WILL BE ISSUED BY APIIT ONLY.

Acknowledgment

**Choice of Test Center**

**Test Centre Code :**

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(First)

--	--	--

(Second)

--	--	--

(Third)

**Test Centre Name :**

\_\_\_\_\_

(First)

\_\_\_\_\_

(Second)

\_\_\_\_\_

(Third)

**Signature of the Candidate**

\_\_\_\_\_

**For Office Use**

Allotted Test Centre Code :

--	--	--

Allotted Test Centre Name :

\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Choice of Test Center**

**Test Centre Code :**

--	--	--

(First)

--	--	--

(Second)

--	--	--

(Third)

**Test Centre Name :**

\_\_\_\_\_

(First)

\_\_\_\_\_

(Second)

\_\_\_\_\_

(Third)

**Signature of the Candidate**

\_\_\_\_\_

**For Office Use**

Allotted Test Centre Code :

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Allotted Test Centre Name :

\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Centre Superintend/Invigilator with Seal**

(Candidate should write his/her name and address in Capital Letters)

To

Name \_\_\_\_\_

Correspondence Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ Pin 

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Telephone with STD Code : \_\_\_\_\_ Mobile : \_\_\_\_\_

Candidate to affix ₹. 4/- postal stamp