

**INSTITUTE OF TECHNOLOGY, GOPESHWAR**  
(Affiliated to Uttarakhand Technical University, Dehradun, Government of Uttarakhand)  
Approved by AICTE, Ministry of HRD, Government of India, New Delhi

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**APPLICATION FORM FOR ADMISSION**

Name of the Program (B. Tech)

Branch.....

(State Quota/All India Quota/Kashmiri Migrant)

\*Institute ID..... Enrollment No. ....

(\* These will be supplied later by the institute/university)

1. Name of the Candidate : .....

2. Father's Name : .....

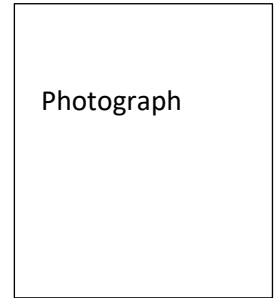
3. Mother's Name : .....

4. Date of Birth : .....

5. Sex : .....

6. Identification Mark 1. : .....

2. : .....



7. Category: .....Sub Category: .....

8. (a) JEE Roll No. : .....

(b) State Rank : .....(c) All India Rank: .....

9. Permanent Address: .....

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City: .....State: .....

Phone: (a) Landline No. : .....(b) Mobile No. : .....

10. Temporary/correspondence address: .....

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City: .....State: .....

11. Name of the Guardian/Parent with address:

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City: .....State: .....

Phone: (a) Landline No. : .....(b) Mobile No. : .....

12. Student's Personal Communication

Mobile: .....Email: .....

13. Medical History:

- (a) Minor Disease: .....
- (b) Major Disease: .....
- (c) Allergy if any: .....
- (d) Blood Group: .....
- (e) Physical disability if an: .....

14. Parents occupation and Income:

- (a) Father: .....
- (b) Mother: .....

15. Educational Qualification: (10<sup>th</sup> onwards)

S. No.	Name of the Examination	Name of the Board/University	Year of Passing	% of Marks	Subject Taken
1.					
2.					
3.					
4.					

16. Extracurricular activities:

- (a)
- (b)
- (c)
- (d)

17. Hobbies if any:

- (a)
- (b)
- (c)

It is certified that details given above are correct to the best of my knowledge. In case, any information is found to be incorrect at any stage, I understand that my admission will be cancelled.

Date:

Signature of Parents/Guardian

Signature of the Student