



Since 1993

PKM Educational Trust (R)

# R R Institutions

Rajareddy Layout, Chikkabanavara, Bangalore - 560 090.

PHD | ENGINEERING | ARCHITECTURE | NURSING | PHARMACY | MBA  
ALLIED HEALTH SCIENCES | POLYTECHNIC | EDUCATION | DEGREE | PUC

Academic Year \_\_\_\_\_

College Admission Number: \_\_\_\_\_

## APPLICATION FORM

Name of Student (In Block Letters): \_\_\_\_\_

Student Mobile No: \_\_\_\_\_

Student E- Mail ID: \_\_\_\_\_

Recent  
Passport  
Size Photo

### COURSE APPLIED FOR :

#### Engineering – BE/ B. Tech



- Civil Engineering
- Computer Science & Engg.
- Electronics & Communication Engg.
- Electrical & Electronics Engg.
- Information Science & Engg.
- Mechanical Engg.
- Ph.D

#### Polytechnic



- Civil Engineering
- Computer Science & Engg.
- Electronics & Communication Engg.
- Electrical & Electronics Engg.
- Mechanical Engg.

#### Management



- M.B.A
- B.C. A
- B. Com Tourism
- BBA Aviation
- B.Sc. Criminology
- B.A. Forensic Science

#### Architecture



- B.Arch

#### Education



- B.Ed.
- Pre- University

#### Medical Health Science



B.Sc. in

- Perfusion Technology
- Optometry
- Operation Theatre Technology
- Radiology & Imaging Technology
- Cardiac Care
- Anaesthesia
- Anaesthesia & OTT
- Renal Dialysis

#### Pharmacy



- Diploma in Pharmacy
- Bachelor's in pharmacy
- Doctorate in Pharmacy
- Post Baccalaureate
- M. Pharm
- Ph.D.

#### Nursing



- GNM  B.Sc.  PBBSc.
- M.Sc.
- Pediatric
- Medical Surgical
- Community
- Psychiatry
- OBG
- Ph.D.

## PERSONAL DETAILS



Date of Birth: \_\_\_/\_\_\_/\_\_\_ Sex: M/F \_\_\_ Caste: \_\_\_\_\_ Blood Group \_\_\_\_\_

Nationality: \_\_\_\_\_ Nationality Citizenship / Aadhar No: \_\_\_\_\_

Passport Number if Foreign National/NRI(If yes enclosed passport copy) \_\_\_\_\_

Father Name: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Mother Name: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Permanent Address:

Address for Correspondence of Applicant  
(If different fro Permanent address)

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Entrance Test Details: Examination: \_\_\_\_\_ Rank: \_\_\_\_\_

Qualifying Examination Passed: \_\_\_\_\_ Percentage/ Marks \_\_\_\_\_ Reg. No. \_\_\_\_\_

### Hostel



Yes  No

If yes: Sharing \_\_\_\_\_

Food : Required  Not Required

Local Guardian Name (if any): (Only local guardian mentioned here will be allowed to meet the student or any correspondence locally)

Local Guardian Address:

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.....  
.....

Local Guardian  
Photo

Relation with Students: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Email ID: \_\_\_\_\_

Aadhar No: \_\_\_\_\_

## DECLARATION BY THE STUDENT

To,  
The Principal

\_\_\_\_\_ (Specify the Name of Institution Applied for Admissions)

Raja Reddy Layout, Chikkabanavara, Bangalore-560090

I \_\_\_\_\_ have read the following rules, terms & conditions of my admission in to \_\_\_\_\_ and I shall abide the same.

1. I pledge that all the information provided by me is true to the best of knowledge.
2. I do hereby undertake that I will not cause any damage or deface any property of the college as well as hostel.
3. I will regularly attend all my classes throughout the course, and I will maintain minimum 85 percentage of total attendance every semester or year as per the rules of the affiliated University.
4. I am aware that if 85 percentage of total attendance in all the subjects is not maintained by me then I shall not be allowed to appear for the University examinations.
5. I will complete and submit all the academic assignments given by the college to achieve academic improvement in the respective subjects throughout my course.
6. I shall follow rules, regulations & disciplinary measures of the college (which shall be notified time to time) with due diligence and shall not cause any disturbance to the learning process.
7. I shall not indulge in ragging or any other kinds of misconduct.
8. I shall not indulge in bad habit like, smoking, consuming alcohol or consumption of narcotic drugs.
9. I will abide by the decisions of the competent authority of the management in all discipline related matters of the college.

Place:

Date:

Signature of the Student

## DECLARATION BY THE PARENT/GUARDIAN

I have read the above-mentioned rules & regulations of the college my ward has to follow and abide for the admission to the course. I am agreeing to the same and I shall be responsible for his/her good conduct, attendance or any other matters during the period of my ward's stay in the college. I acknowledge that, promotion or admission to higher class is possible only when my ward qualifies in certain entitling parameters set by the University as well as the College.

I pledge that all the information provided by my ward is true to the best of knowledge. I take complete responsibility to abide by the policies, rules, regulations & disciplinary measures of the Institutions. In case of non-conformation of the same by my ward I shall accept the decisions of the management as final and ultimate. I shall confirm that, in case of my ward's discontinuation from the course for any reason, I shall forgo the entire fees amount including deposit amount paid to the Institution and shall not claim any reimbursement from the Institution or College.

Signature of the Parent/Guardian

Place:

Contact No:

Date:

Email ID:

## Documents Required: (Originals along with three sets of xerox copies)

Particulars	Originals Submitted	2 sets Xerox Submitted	Received by
SSLC / SSC / 10th Marks Sheet			
II PUC / 10+2 / PDC Marks Sheet			
Transfer Certificate (issued from institution last studied)			
Conduct Certificate (issued from institution last studied)			
Migration Certificate (issued from institution last studied)			
8 Recent Passport size Color Photograph			
Nationality Certificate-Aadhaar (Indian)/ Passport/Nagarik (Nepali)			
Student Passport & Visa (for foreign nationals)			
Degree Certificate & Marks Sheet (for post-graduation studies & B.Ed.)			
KEA Allotment letter with fee paid receipts (for Karnataka Students)			
Diploma Certificate / Marks Sheet (for lateral entry students and Pc BSc.,)			
Others			

### For office use only

#### Fee Details :

Description	1 <sup>st</sup> Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	4 <sup>th</sup> Year	5 <sup>th</sup> Year	6 <sup>th</sup> Year
Total Fee						

Admitted by	Verified by	Entered by	Approved by
Code: _____	Name: _____	Name: _____	Name: _____
Name: _____	Sign : _____	Sign : _____	Sign : _____
Mobile: _____			

