

Dr. N.G.P. INSTITUTE OF TECHNOLOGY

An Institution of Kovai Medical Center Research and Educational Trust Approved by AICTE, New Delhi | Affiliated to Anna University, Chennai Recognized by UGC & Accredited by NAAC and NBA (BME, CSE, ECE, EEE & Mech)

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Govt/			GREE COURSES (20	•					
1.	Name of the candidate (IN BLOCK LETTERS)								
2.	Name of the Parent / Guardian			Affix your					
3.	Admission Category	Government [Management —	Passport size					
4.	Gender	Male	Female —	Photo here					
5.	Date of Birth and Age								
6.	Community	SC / ST / SC	CC / MBC / DNC / BC / BC(M) / OC / O	thers					
7.	Caste								
8.	Religion		Blo	ood Group :					
9.	Aadhaar Card No.								
10.	Address for communication								
		State:							
		Pin code :							
		Parent Mobile No. :							
		Land Line (STD Code)							
11.	Permanent Address								
		State:							
		Pin code :							
		Parent Mobile No. :							
		Land Line (ST	TD Code)						

12.	Nationality	:					
13.	Native Place	:					
14.	Place of Birth	:					
15.	Mother Tongue	:					
16.	Extra curricular activities	: S	Sports / Games / NS	S / NCC / Others			
17.	Occupation of Parent / Guardian	:					
18.	Annual Income of the Parent	:					
19.	Medium of Instruction last studied	: E	inglish / Tamil				
20.	Educational Details						
	SLC / EQUIVALENT					REGISTER NO :	
Boa	rd of the Examination			State			
SI No	SHBJECT			MARKS SECURED	MAXIMUM MARKS	GRAND TOTAL	PERCENTAGE
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						_	
						_	
В. Н	SC / EQUIVALENT				HSC RE	GISTER NO :	
Boar	d of the Examination			State			
SI No	SUBJECT			MARKS SECURED	MAXIMUM MARKS	GRAND TOTAL	PERCENTAGE
						-	
						-	

DECLARATION BY THE STUDENT	ر المصداء	Con / Do	abtou	.f (Name of the	. Помо	at) bayabı
I			-	· ·		, -
Place :						
Date :				Signature	e of the	Student
DECLARATION BY THE PARENT						
I(Name of the Parent) that I am fully aware of the details of my Son / Daughter and my				, ,	solemi	nly declare
Place :						
Date :						
F	0D (OFFICE I	ICT OF	·	ure of	the Parent
	UN (OFFICE U	JOE UI	Date :		
HSC (Academic)		HSC	(Vocati			
Physics :		Mathe	ematics	:		
Chemistry :		Vocat	ional S	ubjects		
Mathematics :		Practi	cal	:		
Aggregate :		Theor		:		
Total :		Aggre	gate	:		
CUTOFF :		Total CUTO	EE	:		
		CHECK I				
	,	UHEUK I	-101	Date :		
1. Allotment Order No	:		10.	Nativity Certificate	:	
2. Counseling Call letter (Online copy)	:		11.	Declaration form	:	
3. S.S.L.C. / Equivalent	:		12.	NRI documents	:	
4. HSC / Equivalent	:		13.	Eligibility Certificate	:	
5. Transfer Certificate	:		14.	Photo Copies (4 Nos) (Original Certificates) :	
6. Community Certificate	:		15.	Passport Size Photos (4 Nos)	:	
7. First Graduate Certificate (only Govt. Quota)	:		16.	Scholarship Form	:	
8. First Graduate declaration form (only Govt. Quota)	:		17.	Income Certificate	:	
Physical Fitness Certificate	:		18	Aadhar card (Photo Copies - 2 Nos)	:	
Signature of the Verifying Officer					Pr ⁱ	incipal

ININT DECLARATION

Date :

	JOINT	DECEMBATION				
		F/0				
	(Parent Name)	(Student Name & Course)				
	hereby solemnly and sincerely affirm					
1.	by him/her are true. My son / daughter / ward has been admitted sheets / NRI* documents submitted by me in full as required I Should it however be found at a later date that any information/d liable for criminal prosecution and I also agree to forfeit his/h Authorities concerned and proved that they are bogus, I fully u Dr.N.G.P.Institute of Technology and the affiliating Anna University.	Is / daughter's / ward's application as also in all the enclosures there to submitted the college during the current academic year based on the documents / mark by the Anna University, Chennai are true/genuine to the best of my knowledge locuments / mark sheets / NRI* documents, furnished is untrue, I realize that I amer seat in the Institution. If the documents are verified by the Anna University / ndertake to accept the entire responsibility for the damages and fully indemnify sity, Chennai from the process of legal suits and other proceedings for any relief and illegal submission of information and documents for seeking admission.				
2.		rules and regulations in force now or which may be introduced in the Institution the part of my son / daughter / ward would / lead to forfeiture of his / her seat in				
3.	· · · · · · · · · · · · · · · · · · ·	(I) the minimum percentage attendance stipulated by the University during the c, my son / daughter / ward will not be sent for the University Examination.				
4.	That I am aware that if my son / daughter / ward does not get minimum of 50 percent of marks in the day to day valuation of his / her work she will not be sent up for the University Examination.					
5.	That I am aware that the curriculum for the various courses is not rigid and that my son / daughter / ward will follow the syllabi for various courses in force at the time of his / her admission and that any revision or modification made in the syllabi during the course of his / her sin the institution will be binding on him / her.					
6.	That in case of my son's / daughter's / ward's progress in terminated by the issue of Transfer Certificate.	studies is uniformly poor in the Institution his / her studies are liable to be				
7.	That I am aware that if my son / daughter / ward is admitted into the hostel he / she will strictly abide by the rules and regulations in force in the hostel and that any breach of discipline or rules or any unruly conduct or undesirable activities will be summarily dealt with by forfeiture seat both in the hostel and in the Institution in addition to such other proceedings that may be taken against him / her. I hereby authorize are permit my son / daughter / ward to take permission from the class advisor / HOD / Principal and the Hostel warden / Deputy warden before proceeding out of the hostel / college either on permission or on leave, during the entire period of his / her stay in the hostel / study in the college.					
8.	That I know fully well that the fees paid by me for admitting my son / daughter / ward in the institution in the First year / Second year and for subsequent years is non refundable. I assure the management that I will not seek refund (legally or by any other means) of any of the feepaid by me at the time of admission or later of my son / daughter / ward even if he / she happens to discontinue the course, at any time. I alsa agree to pay any loss / compensation as determined by the Institution on account of my son / daughter / ward discontinuing his / her studienthem in the middle of the course.					
We h	nave read and fully understood all the above conditions in the jo	int declaration and agree to abide by the same.				
Sign	nature of the Parent/ Guardian :	Signature of the Student:				
Nam	ne of the Parent/ Guardian :	Name of the Student :				
Plac	e :					