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Form	No	
Admission	No	

(Established under UP Govt. Act No. 24 of 2010 and approved under section 22 of UGC Act 1956)

ADMISSION FORM

(Affix your self-attested recent photograph) Name of the Candidate (in English) exactly as mentioned in class X Certificate Name of the Candidate (in Hindi)												
Date of Birth : Date Month Year Blood Group												
Gender: Male Female Nationality:												
Category : Gen. OBC SC ST Others (Pl. specify)												
Educational Qualification: (Attach self-attested photocopies of Marksheets and Certificates)												
Exam / Course Passed	Degree/ Diploma	University/ Board	School/ College	Subjects		ear of % Marks						
Secondary/High School	•											
10+2 or Equivalent												
Graduation												
Post Graduation												
Any Other												
Father's Name												
Occupation (Designation, Organization)												
Salary / Income (Per Ar (Attach Copy of Salary/ Income		ental annual incom	e is less than ₹2 la	ıkh)								
Mother's Name												
Correspondence Add	lress :											
					Pin No. :							
Phone No. :				Mob. (Student) :								
Mob. (Father):				Mob. (Mother) :								
Parent's e-mail id :				Candidate's e-mail	l id :							
Permanent Address	(if different f	from corresp	ondence ad	dress) :	Pin No. :							
Person to be contact	ed in case o	f emergency	:									
Name:												
Relationship with Can	didate :			Contact No. :								

Branches / Speci	ializatio	ons d	esir	ed (in	ord	er of	pref	ierer	nce)	(in ca	ase of	Diplom	a/ B.1	Tech/ M	1.Tecl	n/ M. Pha	ırm /N	/IBA/I	M.Sc	cours	es)		
(i)		•••••	•••••	•••••		•••••		••••	(ii) .	••••	•••••	•••••	••••		••••	•••••	••••	••••	• • • • •	•••••	••••		
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Other Informati	ion :						J L												Att	tach	prod	of the	ereof
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Do you have any Local Guardian: Yes No If Yes, then mention his / her																							
Name :						ĺ				T		1										1	
Occupation :																							
Address with Co	ontact	No.																					
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Signature of the Fa	ather/ G	Guard	ian													S	igna	atu	re o	f th	e Ca	ndi	date
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Documents		Stat	us	(for	(for Office use only)			D	ocui	iments					Stat	us	(f	or C	Office	e use	e onl	y)	
High School Marksh	oot	Voc	/ No	Che	cked	Ву	Rema	rk		\	al Tr	nofo	- Ca	v+:f: 00	.+.	Voc	/ NI o	_	hecl	ked E	By F	Rema	rk
High School Marksh High School Certifica			/ No / No											rtifica `ertifi		Yes /							
10+2 Marksheet			/ No							_		_		Certifi									
10+2 Certificate			/ No							_		ficate				Yes /							
Graduation Marksho	eet	Yes	/ No						lı	ncom	ne/Sa	lary (Certi	ificate	9	Yes /							
Graduation Degree			/ No						(i	fapp	olicab	le)											
Post Graduation Ma			/ No			<u> </u>				Gap Year Affidavit (if any)					Yes /		_						
Post Graduation Deg	gree		/ No							Domicile Certificate					Yes /								
Aadhar Card Result Card of Entra	nco Tost		/ No			_ _						Photo	gra	phs		Yes /							
(if applicable)	iice iest	162	/ No								Other Yes / No _ _												
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Date:																							

Place:

Signature of the Admission Incharge