





www.kiet.edu RE-REGISTRATION FORM, SESSION (2	·
PERSONAL INFO	RMATION
DATE OF ISSUE : 2021-09-18	STATUS:
ROLL NO: 1900290130011	COURSE: B.TECH SEM: 5 SEC: A
NAME: ADITYA PRATAP SINGH	SUDENT'S MOBILE : 6306161857
FATHER'S NAME: Mr. MITHILESH KUMAR SINGH	FATHER'S MOBILE: 7905471958
SUDENT'S EMAIL ID : adi.adityapratapsingh786@gmail.com	PHYISCAL HANDICAPPED: NO
CATEGORY: GENERAL	RELIGION: HINDU
BANK DETA	AILS
ACCOUNT NAME: ADITYA PRATAP SINGH	ACCOUNT NUMBER: 50100375064362
IFSC CODE: HDFC0004768	BANK NAME: HDFC Bank
ADDRESS: HDFC BANK LTD SARDAR PATEL POST GRADUATE INST OFDENTAL AND MEDICAL SCIENCES LUCKNOW UTTAR PRADESH 226025,UTTAR PRADESH	BRANCH: RAIBAREILLY ROAD LUCKNOW
STUDENT INSU	URANCE
NOMINEE: FATHER	NOMINEE'S NAME : MITHILESH KUMAR SINGH
PARENT'S INSU	URANCE
INSURER: MOTHER	INSURER'S NAME: MAMTA SINGH
INSURER'S AADHAR NO. : 327635944746	INSURER'S DATE OF BIRTH: 1978-10-02
INSURER'S OCCUPATION.: HOMEMAKER	INSURER'S NOMINEE : ADITYA PRATAP SINGH

INTERNSHIP DETAIL

STUDENT SIGNATURE

(For use by the class Co-ordinator)

CERTIFIED THAT FOREGOING DETAILS HAVE BEEN CHECKED BY ME. HE/SHE IS ALLOWED / NOT ALLOWED TO REGISTER.

DATE SIGNATURE OF CO-ORDINATOR/HEAD OF DEPT