

MASTER OF SCIENCE IN INFORMATION TECHNOLOGY Consortium of Institutions of Higher Learning – Hyderabad

APPLICATION FORM

FOR ADMISSION IN TO 2-YEAR MSIT FOR THE YEAR 2017

3. The hall ticket of entrance examination will be sent through E-mail on or before 16 th May 2017. 4. For more details visit our website www.msitprogram.net Application No : 170D00343 1. Name of the Candidate (as per SSC or Equivalent certificate)	Instructions: 1. Last Date for receipt of filled in Application 15th May 2017 2. Application should be accompanied by a non refundable demand draft of Rs. 700/- drawn in favour of "CIHL", on a scheduled bank payable at Hyderabad.	SSC/CBSE/ICSE Hall Ticket No.							
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Paste your recent color photograph 2. Nationality (tick √)									
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2. Nationality (tick √)		Paste your recent							
If others, country's name DO NOT staple 3. Sex (tick √)		color photograph							
3. Sex (tick √) Male Female 4. Date of Birth: Day Month Year 5. Test centers (choose any one of the below centers) Hyderabad Tirupati Visakhapatnam Vijayawada Warangal Kakinada Ananthapur 6. B.Tech / B.E: Passed in year Pursuing Final Year	2. Nationality (tick √) Indian Others	here.							
3. Sex (tick √) Male Female 4. Date of Birth: Day Month Year 5. Test centers (choose any one of the below centers) Hyderabad Tirupati Visakhapatnam Vijayawada Warangal Kakinada Ananthapur 6. B.Tech / B.E: Passed in year Pursuing Final Year	If others, country's name	DO NOT stanle							
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7. Complete Address for Correspondence of the Candidate	6. B.Tech / B.E: Passed in year Pursuing Final Year								
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8. GRE (If you I	have valid score)	_				
GRE: Anal	ytical	Quantitative		Verbal		
Entrance Test Wai 1. Candidates who		July 2014 are exempted	I from the entra	ance test if they	a score of 3	301/3.0
9. Have you alrea	ady taken the "Wall	k in Entrance Test?"				
If so, your walk	c in ID					
10.		Mobile N	No.			
11. E-mail Id						
12. Name of the I	Parent / Guardian					
13. Relationship	to the Candidate (tick √) Father	Mother	Other		
14. DD details	DD Number					
	Date of Issue					
	Bank Name					
	Branch Name					
15. Declaration b	y the Candidate					
complete and	correct. In case a stand cancelled, if	iculars furnished by iny information is fou fadmitted, besides re	und to be ind	correct, my a	dmission s	
Place: Date			s	ignature of t	the Candid	date
For more informa	tion contact:					

The Dean, MSIT Programme Consortium of Instructions of Higher Learning IIIT Campus, Gachibowli, Hyderabad – 500032 Phone: 040 – 23001970

Email: enquiries2016@msitprogram.net Mobile: 7799834583 / 7799834585

www.msitprogram.net