

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

| Last Date for receipt of filled in Application 15th May 2017 Application should be accompanied by a non refundable demand draft of Rs. | SSC/CBSE/ICSE Hall Ticket No. | | |
|--|----------------------------------|--|--|
| 700/- drawn in favour of "CIHL", on a scheduled bank payable at Hyderabad.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 <u>www.msitprogram.net</u> | | | |
| | | | |
| Application No: 170D02584 | | | |
| Name of the Candidate (as per SSC or Equivalent certificate) | | | |
| | Paste your recent | | |
| | color photograph | | |
| 2. Nationality (tick √) | here. | | |
| If others, country's name | DO NOT staple | | |
| 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 Vijayaw | rada . | | |
| Warangal Kakinada Ananthapur | | | |
| 6. B.Tech / B.E: Passed in year Pursuing Final Year | | | |
| 7. Complete Address for Correspondence of the Candidate | | | |
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| 8. GRE (If you | have valid score) | | | | | |
|---------------------------------------|--|----------------------|----------------|---------------------|--------------|--------|
| GRE: Ana | ytical | Quantitative | | Verbal | | |
| Entrance Test Wa 1. Candidates who | ived have taken GRE after J | uly 2014 are exempte | ed from the en | trance test if they | a score of 3 | 01/3.0 |
| 9. Have you alre | ady taken the "Walk | in Entrance Test? |)" | | | |
| If so, your wal | k in ID | | | | | |
| 10. | | Mobile | No. | | | |
| 11. E-mail Id | | | | | | |
| 12. Name of the | Parent / Guardian | | | | | |
| | | | | | | |
| 13. Relationship | to the Candidate (ti | ck √) Father | Mother [| Other | | |
| 14. DD details | DD Number [| <u> </u> | | | | |
| | Date of Issue | <u>2</u> | | | | |
| | Bank Name | | | | | |
| | Branch Name | | | | | |
| 15. Declaration b | y the Candidate | | | | | |
| complete and | are that all the partic I correct. In case an stand cancelled, if a em fit. | y information is fo | ound to be i | ncorrect, my a | dmission sl | |
| Place: Date | | | | Signature of | the Candid | late |
| For more informa | ation contact: | | | | | |
| The Deep MCIT | Dragramma | | | | | |

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

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

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