

## 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 tocket of entrance examination will be sent through E-mail on or before 16" May 2017.  4. For more details visit our website www.msitprogram.net  Application No : 170D05022  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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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	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

www.msitprogram.net