APPLICATION FORM FOR REGISTRATION AND RE-REGISTRATION TO BACHELOR OF TECHNOLOGY / MASTER OF TECHNOLOGY / PH.D. PROGRAMME (as applicable)

(ACADEMIC YEAR:_____), SEMESTER:_____ (PLEASE WRITE IN ROMAN NUMERALS)

To,

The Director,
Indian Institute of Information Technology, Pune
Pune- 411 041, India.

Sir,

Please affix your recent passport size (3.5x3.5cm) photograph.

I request that I may please be admitted to the B.Tech / M.Tech. / Ph.D. Programme of the Indian Institute of Information Technology, Pune.

1. PARTICULARS:

Name (In Capital Letters):			
Name (In Hindi):			
Date of Birth:			
Name of Programme:		Branch	
MIS No.:		Aadhaar No.:	
Email Id:		Mobile No.:	

2. I wish to opt the following Courses for B. Tech/M.Tech./Ph.D. Programme

Sr. No.	Course Title	Credits (L-T-P-C)
1.		
2.		
3.		
4.		
5.		
6.		
7.		

AUDIT – COURSES (S) (If any)

_____ _____ _____ _____

_____ _____ _____ _____

I shall not request for any special concession such as change in time or day fixed for the Institute Examination etc. on any ground.

3. Fee Payment Details **[Attach fee receipt(s)]**:

S. No.	Transaction reference No (UTR No)	Transaction date	Fee amount (INR)	Remarks
1				
2				
3				
4				
Total (Rs.)				

NOTE *(Not Required for 1st Semester)*
It is mandatory for all IIIT Hostel inmates to clear all their hostel mess and other dues of the previous semester and the same must be endorsed by the Chief warden/ Warden to proceed for the current semester registration. If anyone fails to clear the dues and submit their form in the office, it will not be treated as the applicant has done registration and the same will be rejected.

As per Hostel records, it is certified that the IIIT Hostel has "No Dues" against Mr./Mrs./Ms.
_____MIS No._____

Signature of Hostel Staff

Signature of concerned Warden

DECLARATION

I shall observe and abide by the rules of the Institute on conduct and disciplinary matters. I shall also abide by all the relevant provisions of the Ordinances of the programme, including the attendance requirement etc.

Further, I have paid all Institute/Hostel/Library dues and current semester fee. I have not been debarred from registering on any specific ground.

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false / incorrect, my candidatures is liable to be cancelled or rejected and fees paid by me forfeited.

Signature of the Student

Date: Name of Student:

I certify that I have gone through this application of Mr./Ms./Smt _____and I recommend the application for registration/re-registration/not to be re-registered.

Faculty Advisor

Student should be registered/re-registered/not to be re-registered.

Head of the Department