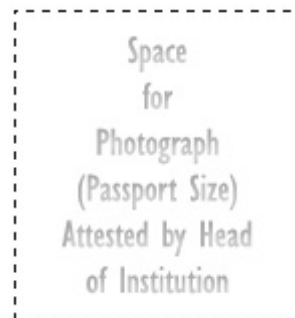


REGISTRATION-CUM-ENROLMENT FORM

Amity School of Engineering and Technology, Kolkata

Programme Enrolled For B.Tech (CSE)
Academic Session 2017-2018
Admission Category NS
Full Name of the Student RITIK VERMA
Father's Name KISHAN VERMA
Father's Occupation Self Employed
Mother's Name KIRAN VERMA
Mother's Occupation Not Working
Nationality Indian
Date of Birth THURSDAY, AUGUST 19, 1999
Sex MALE
Category Gen
Emergency Contact No 9830091114
Aadhaar No 938338705144



Correspondence Address

Address GANPATI VIHAR,ASWININAGAR,BLOCK-2,FLAT NO.-105,BAGUIATI KOLKATA-700159
City KOLKATA
State West Bengal
Country India
Pin 700159
Tel 7003254871
Fax
Mobile 8961713483
Email ritikverma8100775754@gmail.com

Permanent Address [Address of Parents]

Address GANPATI VIHAR,ASWININAGAR,BLOCK-2,FLAT NO.-105,BAGUIATI KOLKATA-700159
City KOLKATA
State West Bengal
Country India
Pin 700159
Tel. 7003254871
Fax

Local Guardian(s) to be contacted in emergency

Full LG Name
Address
City
State
Pin
Tel.
Mobile No
Fax
Email

Place of stay during this Semester

With Parents
Address GANPATI VIHAR,ASWININAGAR,BLOCK-2,FLAT NO.-105,BAGUIATI KOLKATA-700159
City KOLKATA
State West Bengal
Pin 700159
Tel. NA
Mobile No NA
Email NA

Details of educational Qualification(from high School onwards)

Name of Qualifying Exam	Year of Passing	School/College	Board/University	Subjects / Stream	Percentage	Class/ Divison/ Grade
Xth	2015	Calcutta Public School	ICSE	English,Hindi,Mathematics,Science,Commercial Application,History, Civics and Geography	82.66	82.66

XIIth	2017	Calcutta Public School	ISC	English,Hindi,Physics,Chemistry,Mathematics,computer science	91.50	91.50
Graduation	0					0.00

Any type of sickness that you are prone to and the line of treatment

Any particular Doctor to be contacted in case of your sickness

Full Dr Name NA
Address NA
City NA
State NA
Pin NA
Tel. NA
Mobile No NA
Fax NA
Email NA

Your Blood Group O+VE

UNDERTAKING

I solemnly affirm that the above information made and furnished by me is true and correct. Further, I am being admitted to the above stated Programme entirely on my request and I agree to abide by all the rules and regulations of the Institution/University which I have read and understood. I was given opportunity to clarify any doubts I had and I shall not hold the Institution/University responsible for not understanding the same. In the event of suppression or distortion of any fact like educational qualification, nationality, etc. made in the Registration-cum-Enrolment Form, I understand that my admission is liable for cancellation.

I have full knowledge of the fact that in case my attendance in any subject falls below 75%, I shall not be allowed to appear in the end term Examinations

Date _____

Place _____

(Signature of Student)

Office Seal

(Name & Signature of the Verifying Faculty)

Date _____

For official use

Enrolment no. allotted

--

Date _____

Place _____

(Signature of Authorised Officer)