

# **Indian Institute of Information Technology, LUCKNOW**

Dear Candidate,

**Congratulations** on your being allotted a seat at Indian Institute of Information Technology, LUCKNOW (IIITL), in its Four year full time Residential B. Tech. Information Technology (IT) and Computer Science (CS) Degree Program. On behalf of the Institute, it is a pleasure to welcome you onboard into the IIITL family !

We hope that during the time that you spend with us here, we shall be able to assist you in shaping yourself as a professional in the field, on which the society in general and you in particular, shall be proud of. We have adequate infrastructure to support you in your endeavor and hope that you will utilise it fully in your favour, while your stay here (we are further, always in the process of fortifying our infrastructure, to match the pace of latest developments in the field).

Kindly note that the admission process is completed only after:

- 1) Your credentials are physically verified at the Institute & uploaded on the web portal,
- 2) Requisite academic Fees and Hostel/Mess Charges are received in the Institute,
- 3) Enrollment number is allotted to you,
- 4) Confirming your admission to CSAB 2019 is done,

at the Institute. Your initiating the process of admission before reaching here in person, shall however hasten your admission process, once you are here. **Your personal presence alongwith the Certificates and Documents as detailed in attachments, in ORIGINAL are necessary at the time of admission, as per the CSAB 2019 declared schedule.**

IIIT Lucknow is a fully electronic payment compliant campus, where NO CASH / Demand Draft based transactions are undertaken. So either transfer the fees and Mess Charges (in separate Accounts) through Net Banking and bring to us the UTR Receipts for our reconciliation OR pay the fees at the time when you come to us for admission through your DEBIT / CREDIT Card. In such a case, Pl. ensure that your card has a daily limit of funds transfer for upto Rs. **154300/-** (For all Categories General / OBC / SC / ST / PwD Candidates). In case the admission requirements are not completed owing to non materialising of transaction through Debit / Credit Card, the onus of the outcome shall rest with the candidate. Requisite Bank / Card Transaction charges, are also payable by the candidate.

Looking forward to meeting you at IIIT Lucknow,

With Good Wishes,

**IIIT-Lucknow**

**For General Information of ALL Candidates**  
**Seeking Admission at IIIT- Lucknow through CSAB 2019**

**A. How to reach IIIT- Lucknow :**

The IIIT Lucknow campus is located at Chack Ganjeria (Sultanpur Road), Lucknow . It is 13 km from the SGPGI and 14 km from the main railway station (Charbagh Junction). Lucknow is very well connected by Trains from all places like Delhi, Kolkata, Guwahati, Mumbai, Chennai etc. Indian Railway services to Lucknow are excellent and quite comfortable. Lucknow is served by Amausi Airport. Direct daily flights from across the India are available from here. It is about 23 kms from the Institute Campus.

**Guide Map for Reaching IIIT Lucknow. Chack Ganjeria. IT City.– 226002**



**B. Documents required at the time of admission:**

**One set of Clear Photocopied documents (A-4 Sized, self-attested) as follows are required to be brought by the selected candidate at the time of reporting to Admission Section, IIIT Lucknow for deposition at the Institute.**

**Reporting Site: Admin Building, IIIT- Lucknow, IT City, Lucknow-226002**

1. Allocation Provisional Seat Letter from CSAB 2019. (ORIGINAL / web copy)
2. Document Verification-cum-Seat Acceptance Letter from Reporting Centre Incharge. (In Original)
3. Receipt of Initial Fee Payment (In Original)
4. CSAB 2019 Admit Card. (as received from CSAB 2019)
5. CSAB 2019 All India Score Card (ORIGINAL / web copy)
6. Class X Certificate & Marksheet. (In Original)
7. Class XII Certificate & Marksheet. (In Original)
8. Caste Certificate (if applicable, for SC/ST/OBC in the Format given in the CSAB 2019 Website (Issued by the Competent Authority)) and/OR EWS Category Certificate as per the CSAB 2019 approved format & Authority. OBC certificate must have been issued on or after 01/04/2019. (In Original)
9. Certificate for Persons with Disability in the CSAB 2019 Prescribed format (for PWD Category candidates only, as may be applicable).(In Original)
10. AADHAAR CARD(In Original)
11. Undertaking in the required format on Non Judicial Stamp Paper (for OBC Candidates only, on plain paper in format by CSAB 2019) (In Original for retention at the Institute), duly notarised by oath commissioner.

12. Character Certificate (In Original) from the Institution last attended.(In Original)
13. Transfer/ Migration Certificate (In Original) from the Institution last attended.(In Original)
14. Three identical coloured passport sized photographs of GOOD QUALITY on Matt Finish against white background (size 35 x 50mm).
15. Medical Examination Report. (In Original in the format attached).Medical examination Report may be got filled in from anywhere, including the candidate's home place. Pl. ensure that the same is duly signed and stamped by the Doctor. Doctor should also clearly state his/her MCI / State Council Registration No alongwith the State in which Registered in case of State Council Registered Doctors.
16. Anti-Ragging Affidavit by the student (to be submitted on a Non-Judicial Stamp Paper of Rs. 10/-, duly notarized by the Oath Commissioner. (In Original for deposition at the Institute)
17. Anti-Ragging Affidavit by the Parent/ Guardian (to be submitted on a Non-Judicial Stamp Paper of Rs. 10/-duly notarized by the Oath Commissioner. (In Original for deposition at the Institute)
18. MCAIP Form for "Medical-cum-Accidental Insurance Benefit Scheme" (TWO SETs in Original, to be deposited at the Institute).

**Originals of Sr. No. 5 to 10 will be required only at the time of verification & returned thereafter.**

**(Note – Kindly maintain the same sequence of documents as given above)**

**C. Details of Documents etc to be uploaded on the web admission portal of the Institute (OPTIONAL) :**

- (i) Passport size color photograph (35x50 mm size, upto 500kb size) and signature (10x30 mm, 100 kb size, black coloured), both in .jpeg format.
- (ii) All academic qualification marksheets, certificate,at the time of registration at the Institute. Documents in Original MUST be brought at the time of Admission.

**D. Hostel Facility:**

- The Institute is a fully residential campus and has provided with modern boarding and lodging facilities. Hostel has adequate recreational facilities including sports. Each student is provided with a Cot, Table,Chair and an Almirah space, the suggested list of items that may be required by a Hosteller during the course of his/ her stay on campus is likely to include the following:
    - One bucket with mug + soap with soap case + Door Lock (Good Quality)
    - Bedding with warm clothing, Blanket/ Quilt & Mosquito Net.
    - Temperature at Lucknow ranges between 7-10 in winters (December - January) and 40 – 49 in summers (April – June).
    - Table Lamp – In case you are habitual otherwise Tube lights are provided in all rooms.
    - Appropriate Clothing & Shoes.
- You may accordingly arrange for them on personal basis.

**E. Fee Structure for IIITL students, to be admitted in 2019**

<b>FEE STRUCTURE FOR <u>B.TECH</u> IIIT-LUCKNOW For Academic Session 2019 - 2020</b>			
<b>For General, OBC, SC, ST and PWD &amp; EWS Category Students (in INR)</b>			
<b>Sl. No.</b>	<b>General Fees &amp; Dues</b>	<b>1st Sem.</b>	<b>2nd Sem</b>
<b>A</b>	<b><u>One Time FEE</u></b>		
	Admission Fee	1500	___
	Institute Caution Money (One time refundable)	2000	___
	Enrolment Fee	1000	___
	Identity Card Fee	1000	___
	Alumni Fund	3000	___
	Institute Development and Maintenance Charges	10000	___
<b>B</b>	<b><u>Annual Dues</u></b>		
	Benevolent Fund	500	___
	Group Insurance and Student Welfare Fund	1300	___
	Library Fee	2000	___
<b>C</b>	<b><u>Semester Fees</u></b>		
	<b>Tuition Fee</b>	<b>99000</b>	<b>99000</b>
	Laptop Charges (if laptop taken from the Institute)	5000	5000
	Hostel Fee (Triple Occupancy Rs. 4800/- ) (Double Occupancy Rs. 7200/- ) (Single Occupancy Rs. 14400/-) Double and Single Room will be allotted only in case of availability of rooms at Hostel	4800*	4800*
	Electricity and Water charges	2000	2000
	Gymkhana Fee	1500	1500
	Examination Fee	1200	1200
	Grade Card Fee	500	500
	Medical Fee	500	500
	<b>TOTAL Fee</b>	<b>136800</b>	<b>114500</b>
<b>D</b>	Mess deposit (One Time Refundable)	2500	___
	Mess Charges (Mess Charges are subject to actual )	15000	15000
	<b>TOTAL including Mess Fee</b>	<b>154300</b>	<b>129500</b>

\* Hostel Fee in the above Fee Structure has been taken for triple occupancy rooms.

Please note that the fee amount which has already been deposited to CSAB as fee will be transferred to IIIT-Lucknow and therefore must be deducted from the total amount mentioned in the first semester fee structure. Payable amount at Institute = [136800–Fee amount deposited at CSAB].

**F. Fee and Mess Charges Payment Methodology:**

Fee and Mess charges. Please see carefully):

<b>Transfer SBI COLLECT, NEFT/RTGS details: [Fee Only]</b> <b>Account Name:</b> Indian Institute of Information Technology Fee Account <b>Fees Account No.:</b> 38503909105 <b>IFSC Code:</b> SBIN0012732 <b>Bank Name&amp; Address:</b> State Bank of India, Arjunganj Branch, Lucknow.	<b>Transfer SBI COLLECT, NEFT/RTGS details: [MESS ONLY]</b> <b>Account Name:</b> Indian Institute of Information Technology Mess Account <b>Fees Account No.:</b> 38510522404 <b>IFSC Code:</b> SBIN0012732 <b>Bank Name/Address:</b> State Bank of India, Arjunganj Branch, Lucknow.
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- a) The web address for SBI Collect to deposit Semester fee is <https://www.onlinesbi.com/sbicollect/icollecthome.htm?corpID=956936> and for Mess Fee is there is a link in SBI Collect <https://www.onlinesbi.com/sbicollect/icollecthome.htm> Select State as '*Uttar Pradesh*' and Type of Institution as '*Educational Institute*' from there you have to select '*IIITL Mess Account*' and pay your Mess Fee.
- b) It is compulsorily to fill the required fields at SBI Collect page and submit your printout of fee receipt to Account Section at the time of admission and document verification.

Orientation Program of the Freshly admitted Candidates to IIITL's B.Tech. Programs, with classes starting alongwith, shall be communicated separately through this web hosting. Students MUST therefore come prepared accordingly.

In case however there is any change in the program, the same shall be flashed on the Institute homepage ONLY.

Students are therefore requested to keep visiting the Institute homepage ([www.iiitl.ac.in](http://www.iiitl.ac.in)) frequently, to keep themselves abreast of the latest developments AND must see this website before proceeding to report at IIIT Lucknow, in there own interest.

# MEDICAL EXAMINATION REPORT

## PART - A GENERAL EXPECTATIONS

Coloured  
Passport Size  
PHOTO

*Candidates will have good general physique with*

- a) Chest measurement should not be less than 70 cm, with satisfactory norms of expansion and contraction.*
- b) Normal vision. In case of defective vision, it should be corrected to 6/9 in both eyes or 6/6 in the better eye.*
- c) Normal Hearing. Defective hearing should be corrected.*
- d) Normal Heart and lungs without any abnormality and having no history of mental illness and/or epileptic fits.*

## PERSONAL HISTORY

1. Name .....
2. Parent/ Guardian's Name:  
(a) Father's Name .....  
(b) Mother's Name .....
3. Age: ..... Years ..... Months.....
4. Gender:..... Blood group.....
5. Identification Marks on the Body: .....  
(This can be a mole or scar)
6. Major illness / operation (in past): .....  
(Specify nature of illness / operation.)
7. Allergies if any: .....
8. Any Chronic illness for which he/she is taking treatment: .....  
(Eg. Diabetes, Asthma, Epilepsy, Kidney disease, Bleeding disorder, etc.)
9. Any kind of disability: .....

## MEDICAL CERTIFICATE

(To be issued by registered medical practitioner not less than MBBS)  
(The following are to be filled by the Medical Officer conducting the medical examination at the candidate side.)

1. Height : .....cm. 2. Weight..... kg.
3. Skin ..... 4. Ears/Hearing:.....
5. Vision with or without glasses :  
a) Right eye : ..... c) Colour Blindness :.....  
b) Left eye : ..... d) Unocular Vision :.....
6. Respiratory system :..... 7. Nervous system:.....
8. Heart : ..... 9. Abdomen :.....  
a) Sounds :..... a) Liver: .....  
b) Murmur :..... B) Spleen :.....

10. a) Hernia : ..... b) Hydrocele : .....

11. Any other health issue : .....

\_\_\_\_\_ **Signature of the Medical Officer**

Full Name : .....

MCI Registration No. .... OR

State Council Registration Number: .....

State with whose Council Registered: .....

Official Seal : ..... Date : .....

**PART - B**  
**MEDICAL CERTIFICATE**

Certified that .....  
son/daughter of .....

a) Fulfills the prescribed standard of physical fitness, as per general expectations stated in Part A and is FIT for admission to M.Tech. Program offered by the Institute.

b) Does not fulfill the prescribed standard of physical fitness and is unfit / temporarily unfit to admission due to following defects:

\_\_\_\_\_ **Signature of the Medical Officer**

**Declaration**

I hereby declare that I am not suffering from any disease other than mentioned in the medical report. In case if any other disease is found for which I am taking treatment for long time and that is not reported to the Institute at the time of admission then the Institute will not bear the cost of treatment.

**Signature of the Candidate**

**Note:** Institute is not liable for the chronic disease treatment which required the prolonged/ lifelong treatment.



**Undertaking by the Student (As per UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009)**

**( To be submitted on a Non-Judicial Stamp Paper of Rs. 10/- duly notarised by the Oath Commissioner)**

- 1) I,..... (full name of student with admission/registration/enrolment number) s/o, /d/o Mr./Mrs./Ms. ...., having been admitted to (name of the institution) , have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.
- 2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
- a) I will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
  - b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
- 6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.
- Declared this \_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_ year.

**Signature of deponent**

**Name:**

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at \_\_\_\_\_ (place) on this \_\_\_\_ day of \_\_\_\_ Month of the \_\_\_\_ Year.

**Signature of deponent**

Solemnly affirmed and signed in my presence on this the \_\_\_\_ (day) of \_\_\_\_ (month) , \_\_\_\_ (year) after reading the contents of this affidavit.

**OATH COMMISSIONER**

**Undertaking by the parent/guardian (As per UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009)**

**( To be submitted on a Non-Judicial Stamp Paper of Rs. 10/- duly notarised by the Oath Commissioner)**

- 1) I, Mr./Mrs./Ms. \_\_\_\_\_ (full name of \_\_\_\_\_ of \_\_\_\_\_ parent/guardian) father/mother/guardian of \_\_\_\_\_, (full name of student with admission/registration/enrolment number) , having been admitted to \_\_\_\_\_ (name of the institution) , have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations"), carefully read and fully understood the provisions contained in the said Regulations.
- 2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4) I hereby solemnly aver and undertake that
- a) My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
  - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
- 6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this \_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_ year.

**Signature of deponent**

**Name:**

**Address:**

**Telephone/Mobile No.:**

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at \_\_\_\_\_ this \_\_\_\_\_ (place) on \_\_\_\_\_ day of \_\_\_\_\_ Month of \_\_\_\_\_ Year

**Signature of deponent**

Solemnly affirmed and signed in my presence on this the \_\_\_\_\_ (day) of \_\_\_\_\_ (month) , \_\_\_\_\_ (year) after reading the contents of this affidavit.

**OATH COMMISSIONER**

## Mediclaim-cum-Accidental Insurance Benefits Scheme (MCAIP)

offered by

**National Insurance Company Limited**

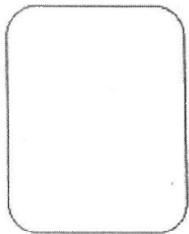
**EXCLUSIVELY for all IITL Students**

### Broad Features of the Scheme\*

- MEDICLAIM Hospitalisation Cover – Upto Rs. 60,000/- per annum.
- Accidental Death OR Permanent Disablement of Insured Student – Upto Rs. 5 Lakhs.
- Carriage of Dead Body of the Insured, upon Accidental Death to place of Normal Residence – Rs. 5,000/-
- Upon Accidental Death of Fee Paying Parent / Guardian – Rs. 3 Lakhs.
- Education Expenses to Dependent Children of Married Insured Students – Upto Rs. 25,000/- per child.
- Mediclaim coverage extends throughout India on 24x7 basis.
- Territorial limits for Accidental Death / Permanent Disablement Insurance extend throughout the world.
- Treatments under Allopathic System of Medicine are only covered.
- Dental treatments and Physiotherapy are not covered for claims/ reimbursements.
- CASHLESS ACCESS SERVICES, at designated Hospitals, subject to Pre – Authorisation.
- Spouse of married Students AND also their dependent Children CAN be covered, for extension benefits, upon payment of additional premiums. NOT COVERED by default in this cover.

(\*Conditions Apply)

### Information required from each student to enable him/ her avail the benefit under the Scheme

Sl. No.	Item	Information	Remark
1	Name of the Student to be Insured	Mr./ Ms./ Dr..... s/o OR d/o ..... Address:..... Enrollment No:..... Degree Program of Enrollment at IIT-A / IITL :..... Nationality :.....	 A Colored Photograph of the Student being Insured, duly Self Attested
2	Complete Address of NORMAL RESIDENCE of the Enrolled Student	Phone Number:..... Email:..... PIN Code:..... Police Station:.....	Date of Birth:..... Sex: Male \ Female Blood Group :.....
3	Details of the FEE PAYING Parent / Guardian of the Enrolled Student	Name:..... Relationship with the Student:..... Address:..... Phone Number:..... PIN Code:..... Email:.....	In the event of the fee paying Parent / Guardian not remaining alive (owing to accidental death, during the Policy Period), during the course of the continuation of the enrolled Degree Program of the student, the student shall be eligible for a payment of Rs. 3.00 Lakh, to assist with the continuation of the studies of the student.
	(a) Marital Status of the Enrolled Student	Married / Un Married	In case of accidental death of the enrolled student, during the

4	(b) In Case " <b>Married</b> ", then Pl. provide the following:	(a) Name of Spouse:..... (b) Age:.....Yrs..... (c) Address:..... Phone Number:..... PIN Code:..... Email:.....	policy period, who is survived by a Spouse, Spouse shall be the NOMINEE for receiving the Insurance benefits, unless otherwise specified. In respect of Unmarried students, the Normal Fee Paying Parent / Guardian shall be the beneficiary.
4 Contd.	(c) Do you have dependent Children (d) In case " <b>Yes</b> " to (c) above, Pl. provide the details:	Yes / No <u>In respect of First Child (Elder One):</u> (a) Name of Child:..... (b) Age:.....Yrs. Sex: M / F (c) Address:..... Phone Number:..... PIN Code:..... Email:..... <u>In respect of Second Child (Younger One):</u> (a) Name of Child:..... (b) Age:.....Yrs. Sex: M / F (c) Address:..... Phone Number:..... PIN Code:..... Email:.....	In case of accidental death of the Insured Student, during the policy period, survived by his dependent children, upto TWO dependent children are eligible for receiving a sum of upto Rs. 25,000/- each, as a onetime assistance by the Insurance company.
5	<b>Pre Existing Diseases*, at the time of admission into the Institute.</b> (* The ones that exist at the time of enrolling at the Institute PLUS the ones those arise within 30 days of the inception of the Insurance Policy. Also include diseases attributable to Pre-existing diseases.)	(a)..... (b)..... (c)..... (d)..... (e)..... (Pl. add if more)	<b>PRE EXISTING Diseases</b> qualify for claim only after four continuous claim free years, in respect of those diseases. Few diseases, that arise after the inception of the coverage, are however included in the list of diseases that are not payable only during the FIRST year of operation of Policy. (Refer Policy document for details)

(Note: The above is a brief description of the salient features of the intended Insurance Policy and is not a replica of the full Policy document. For details, reference to the Policy document should be made.)

#### UNDERTAKING:

- I willingly AGREE to abide by the Terms and Conditions of the MEDICLAIM – cum – Accidental Insurance Policy as briefed herein above.
- I shall personally be responsible for the correctness and completeness of the information provided above and to the satisfaction of the Insurance Company. Also in case of change in my Marital Status, for being eligible for the accrued benefits by the Insurance Company in the same respect, I shall keep the Institute duly apprised.
- Also, I understand that all claims pertaining to Mediclaim-cum-Accidental Insurance Scheme shall be settled by Insurance Company only and Institute's liability in this respect shall be restricted to being assistive only.

Signature of the Enrolled Student:.....

Name of the Enrolled Student:.....

Enrollment Number of the Student :.....

Signature of Father / Mother / Guardian of the Enrolled Student:.....

## Medical Examination Format as prescribed by JEE Mains 2019 Authorities