



Estd. 2000

ABES
Engineering College

NAAC Accredited & NBA Accredited
(CSE, ECE, ME, EN & IT)

Approved by AICTE and Affiliated to
Dr. APJAK Technical University, Lucknow
AKTU College Code: 032

REGISTRATION FORM FOR B.TECH./M.TECH/MBA/MCA (II YEAR ONWARDS)-SESSION 2018-19

Admission No:

Roll No:

(A) Fee Details : (Attach a copy of Fee Receipt)

Fees	Amount Deposited	Date of Deposit	Mode of Deposit (Pay Fee Challan /DD/ RTGS/NEFT)	Deposited at Bank / Branch	College Fee Receipt No.	Balance Fee (If any)
College Fee						
Hostel Fee						
Transport Fee						

(B) Personal Details:

Name of the Applicant _____

Course _____ Branch _____ Shift 1st ☐ Shift 2nd ☐ Year _____

Category : GEN/ SC / ST / OBC _____ Mode of Admission: SEE/SEE (FW) / PMSSS / Direct (Tick which is applicable)

Minority (Sikh/Jain/Muslim/Parsi) _____ E-mail _____@abes.ac.in Personal ID : _____

Student Mobile _____ Blood Group _____ Aadhar Card No.

Permanent Address _____

_____ Pin Code

Correspondence Address (as per attached Proof) _____

_____ Pin Code

Have you any Medical Insurance Cover : Yes/No _____ if yes give details as under :

Name of Agency & No. _____ Duration _____

Whether applied for scholarship from U.P. Govt. in previous year session 2017-18 Yes No (Tick which is applicable)

Whether scholarship received from U.P. Govt. in previous year session 2017-18 Yes No (Tick which is applicable)

Particulars	Father	Mother
Name		
Annual Income		
Occupation		
Phone No. / Mobile No.		
E-Mail ID		

(C) Residential Details

Hosteller ☐

Day Scholar ☐

(Tick which is applicable)

Provide the applicable information-

Hostel Address				Day Scholar Local Address			
Hostel Name							
Room No.		Floor No.					

(D) Academic Details

Sem.	Max. Marks	Marks Obtained	Percentage	Status	Carry Over (Mention Subject Code)
I					
II					
III					
IV					
V					
VI					
VII					

(E) Achievements & Awards**Details of Achievements / awards till previous sem:**

Academic	
Sports	
Cultural	
Any Other	

(F) General Details

Details of Training / Project / Workshop / Seminars undertaken / attended during the course (Inter / Intra College)

Sem	Name of Org. & Venue	Name of Training / Project / Workshop / Seminar	Duration (days)

(G) Details of International / National Paper published / presented in Seminar / Conference :

Sem	Title of Paper	Status of paper (Published/Presented)	Name of the Seminar / Conference with dates	Co- author	Remuneration received (If any)

(H) Have you appeared / preparing for any Competitive Exam (CAT / GATE / GMAT / etc.): (Yes / No)_____

If "yes", please mention the result details : _____

(I) If Involved in any act of indiscipline (Yes / No) _____

If "yes", give details _____

(J) In case of any chronic disease (Yes / No) _____

If "yes", name of disease _____. Name of medicine _____

Declaration

I hereby declare that all the information given above is true and correct to the best of my knowledge and belief. College Authority is free to take any action, even debar from the college, if any information cited above is found false.

Date of Submission _____

Signature of Candidate**For Office use:**

Date of Receipt by Course Coordinator _____

Signature of Course Coordinator _____

Data has been verified in LSA on Date _____

Signature of Deptt. Asstt. with Date _____