

VIT VELLORE INSTITUTE OF TECHNOLOGY
Registration/Admission Form
 (2019-2020)

Name: Roll Number: Date of Birth:

COURSE SELECTION

Sl. No.	Course Name	Branch	Year	Section	Elective	Remarks
1	B.TECH	Computer Science and Engineering	1			
2	B.TECH	Computer Science and Engineering	2			
3	B.TECH	Computer Science and Engineering	3			
4	B.TECH	Computer Science and Engineering	4			
5	B.TECH	Computer Science and Engineering	5			
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67	B.TECH	Computer Science and Engineering	67			
68	B.TECH	Computer Science and Engineering	68			
69	B.TECH	Computer Science and Engineering	69			

100. **PERSONAL INFORMATION** (Please print clearly. Do not use initials or abbreviations.)

101. **NAME** (Last, first, middle initial)
 102. **DATE OF BIRTH** (Month, day, year)
 103. **SEX** (Male, Female)
 104. **EDUCATION** (High school, college, university, etc.)
 105. **PROFESSION** (Occupation, profession, etc.)
 106. **RESIDENCE** (Address, city, state, zip code)
 107. **TELEPHONE** (Area code, number)
 108. **RELIGION** (If any)
 109. **POLITICAL AFFILIATION** (If any)
 110. **OTHER INFORMATION** (Any other information you wish to provide)

111. **SIGNATURE** (Please sign in ink)

112. **DATE** (Month, day, year)

113. **STAMP** (Please stamp in ink)

114. **REMARKS** (If any)

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