

23 History of Hospitalization _____

24. Emergency Contact Person: (please tick one of the three below)

Parents as in Sl. No.17 Local Guardian as Sl. No.18

Others: Give detail:

Name	:	_____
Address	:	_____

Telephone No	:	_____
Mobile No.	:	_____
E-mail	:	_____

25. Academic qualifications

Name of Institution /Board / University from where Certificate / Degree obtained	Examination Passed	Year of Passing	Division	Maximum Marks	Marks obtained

26. Academic qualifications (From High School onwards)

Sl. No.	Details of Documents (Xerox Copies / Original)	Verified	Remarks if any
01.	Provisional Admission Letter (Original)	YES / NO	
02.	Score Card issued by GATE	YES / NO	
03.	High School (Class – X) Certificate as proof of age	YES / NO	
04.	Class – XII / Intermediate Mark Card and Passing Certificate	YES / NO	
05.	Proof of Passing qualifying examination	YES / NO	
06.	Marks Cards of the qualifying examination	YES / NO	
07.	School / College Leaving Certificate (Original) (Certificate from the Institution last attended)	YES / NO	
08.	Migration Certificate (Original)	YES / NO	
09.	Character Certificate from the Institution last attended (Original)	YES / NO	
10.	Category Certificate in case of SC / ST / OBC-NCL candidate issued by the competent authority (OBC-NCL certificate should be issued on or after 01.04.2018)	YES / NO	
11.	Certificate for Physically Challenged (if applicable) issued by the competent authority	YES / NO	

27. Demand Draft Details:

- 1) Transaction ID No. _____ Amount: _____ Date: _____
- 2) Transaction ID No. _____ Amount: _____ Date: _____
- 3) Transaction ID No. _____ Amount: _____ Date: _____

28. Submitted following documents:

- Medical Examination Report Yes No
- **Undertakings:**
 - a) Awareness of medical facilities at NIT Jamshedpur Dispensary Yes No
 - b) Not owning/ or using motor driven vehicles in the NIT Campus Yes No
 - c) Not going towards Kharkhai river area / Villages / Basti Yes No
 - d) Anti-ragging verdict by the Hon'ble Supreme Court and indecent behavior towards junior / fellow student. Yes No
 - e) Late submission of qualifying degree certificate Yes No

29. Declaration by the Student:

- I do hereby agree to abide by all the Ordinances/Statutes and Regulations of the Institute in force from time to time.
- I do hereby certify that entries made by me in this form are correct to the best of my knowledge.
- I do hereby solemnly declare that I have not been debarred at any time from joining any educational Institution or rusticated from the Institution/University last attended.
- I declare that I have not been associated (actively or passively) with any unlawful organization in the past nor I would associate myself with such organizations in future.
- I hereby solemnly declare that I will maintain good conduct throughout my stay at this Institute.
- I understand that the Institute reserves the right to cancel my admission at any time during my stay at the Institute, if the Institute is satisfied that it was in the interest of the Institute to do so.

Date: _____

Full Signature of the Student

30. Parent's/Guardian's Declaration:

- I undertake to pay all Institute fees and subsidiary dues in respect of my ward/son /daughter Sri/Ms. _____ who is being admitted to the National Institute of Technology, Jamshedpur.
- I hereby assure that my ward /son / daughter will abide by all Ordinances/Statutes and Regulations of the Institute.
- I hereby certify that the entries made by my ward in this form are correct to the best of my knowledge and belief.

Place _____

Date: _____

Signature of the Parent / Guardian

Full Name _____

Note:

1. In case of any change in address and/or telephone numbers, parents are requested to kindly intimate the same in writing or by e-mail to the **Dean (Academic) email: dean.ac@nitjsr.ac.in**.
2. The spelling of the name written (in Hindi and English) above will appear in your degree certificate, therefore, you are requested to write your name correctly without any mistake as per high school certificate.

FOR OFFICE USE ONLY

ID No:

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Discipline:

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Signature of Verifying Officer
Full Name:

Signature of Dy. Registrar (Academic)

Signature of Dean (Academic)