

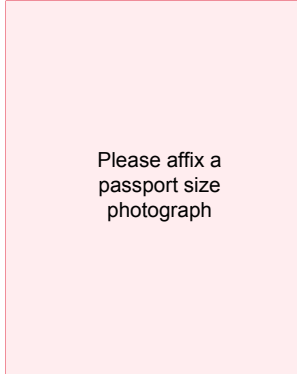
PERI

INSTITUTE OF TECHNOLOGY

Campus Office : No.1, Mannivakkam, West Tambaram, Chennai - 600 048.
Ph: +91 96771 30344 / 96771 30347 / 96771 30343, www.periit.com

APPLICATION FOR ADMISSION

ACADEMIC YEAR 2014 – 2015



Application No :

INSTRUCTION TO CANDIDATES :

Candidates are advised to read the contents thoroughly before filling the form.
Please fill all fields in BLOCK letters only
Please do not fold the application form.

Branch applied for

B.E Courses :

- | | |
|--|---|
| <input type="checkbox"/> ELECTRONICS & COMMUNICATION | <input type="checkbox"/> First Year |
| <input type="checkbox"/> MECHANICAL | <input type="checkbox"/> Lateral Entry |
| <input type="checkbox"/> COMPUTER SCIENCE | <input type="checkbox"/> Transfer |
| <input type="checkbox"/> CIVIL | <input type="checkbox"/> Management Quota |
| <input type="checkbox"/> ELECTRICAL & ELECTRONICS | <input type="checkbox"/> Government Quota |

M.E Courses :

- | | |
|--|---|
| <input type="checkbox"/> APPLIED ELECTRONICS | <input type="checkbox"/> COMMUNICATION SYSTEMS |
| <input type="checkbox"/> COMPUTER SCIENCE | <input type="checkbox"/> POWER ELECTRONICS & DRIVES |

CANDIDATE PARTICULARS

1.Name :

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(As in 10th Mark sheet or Equivalent) First Name Middle Name Last Name

2.Father's Name :

Occupation	
Annual Income	
Landline	Mobile

3.Mother's Name :

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4.Address for communication :

Pincode	Phone
Mobile	Email ID

5. Permanent Address : _____

Pincode _____ Phone _____
Mobile _____ Email ID _____

6. Local Guardian's Name (if any) : _____

7. Local Guardian's Address : _____

Pincode _____ Phone _____
Mobile _____ Email ID _____

8. Sex : M F

9. Height : _____ cm.

10. Weight : _____ Kgs.

11. Date of Birth (As in 10th Marksheet or Equivalent) :
Day Month Year
Age : _____
Blood Group : _____

12. Personal mark of identification : 1) _____
2) _____

13. Nationality : _____

14. Religion : _____

15. Community : ST SC DNC MBC BC OC ADC
Name of Community : _____

16. Mother Tongue : _____

17. Languages Known : _____

18. Marital Status : Single
 Married

19. Are you differently abled? (Please specify) _____

Board of Examination _____ Reg. No _____ Year of Passing _____ No. of Attempts _____

School / Institution _____

Medium of Instruction : Tamil English Other Language (Please specify) _____

For B.E Admissions only
(Please enter 12th marks)

SUBJECT	MARKS
Maths	
Physics	
Chemistry	
Total Marks	

Other Information
(Please fill applicable fields)

QUALIFICATION	MARKS
10th	
Diploma	
12th	
UG	
PG	

Cutoff Mark

Eligible Yes No

Have you appeared for GATE?

Yes No

If yes, attach proof and valid GATE score.

Yes No

Year of Examination _____

Have you appeared for TANCET for PG Courses?

Yes No

If yes, attach proof and valid score.

Yes No

Certified that the above entries are true extracts from the original certificates of _____
(Please enter applicable certificates)

Location:

Date:

Signature:

Official Seal:

To be certified by the Head of the Institution through which the candidate appeared for the qualifying examination OR a Gazetted Officer of the State / Central Government

OTHER INFORMATION

1.Extra-curricular Activities : _____

2.Hostel Accommodation Required : Yes No

3.Transport Required : Yes No

4.Lunch Required : Yes No

DECLARATION BY THE CANDIDATE

I _____ Son/Daughter of _____ hereby affirm that the particulars given in the application form are true, correct and complete. I further declare that should it be found otherwise, I will be liable to forfeit my seat and/or removal from the rolls of the institution at whatever stage I may be, besides making me liable for criminal prosecution. I am fully aware that, as per the direction of the Hon'ble Supreme Court of India and Tamilnadu Prohibition of Ragging Act 1997, ragging is an offence and is banned in all Institutions and anyone indulging in ragging is liable to be punished.

Location:

Date:

Signature of the Applicant:

DECLARATION BY THE PARENT / GUARDIAN

I _____ Parent / Guardian of _____ declare that all the information given herein is true and correct. I stand guarantee for the good conduct of my ward during the course of his/her study and stay in the hostel. I authorize the institution to initiate disciplinary action against my ward for violation of any of the stipulated rules and regulations. I also promise to compensate the damage that may have been caused by my ward due to his/her conduct.

Location:

Date:

Signature of the Parent:

IMPORTANT: Attested copies of the following certificates should be enclosed with the application.

- | | |
|--|--|
| 1. Qualifying Examination - HSC or Equivalent / Degree - Mark sheet - 5 copies | 4. Passport Size Photograph - 6 copies |
| 2. Transfer Certificate - 1 copy | 5. First Graduation Certificate - 2 copies |
| 3. Community Certificate - 5 copies | 6. Joint Declaration - 2 copies |

Note: All original certificates/ testimonials should be produced at the time of admission.

FOR OFFICE USE ONLY

Verification of the particulars submitted	Tick (✓)
1. Mark sheet - 10th / 12th / Degree	
2. Transfer Certificates	
3. Community Certificate	
4. Ranking Order (Counselling Quota)	
5. Income Certificate	
6. First Graduation Certificate	
7. Declaration Certificate	

Admission : Approved Not Approved

Signature of the Approving Authority

Signature of the Chief Operating Officer