



Dr. Ambedkar Memorial Institute of Information Technology & Management Science

JAGDA, ROURKELA - 769042, ORISSA

APPLICATION FORM

Affix your
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photograph

1. Application No.

2. Accommodation

required Y / N

3. Applicant's Name

Surname

Middle Name

First Name

4. Sex

5. Marital Status

6. Blood Group

7. Date of Birth

8. Present Address

Tel. No.

9. Permanent Address

Tel. No.

10. Name & Address of Local Guardian

Tel. No.

11. Father's / Husband's Name

12. Mother's Name

13. Religion _____ Caste _____ 14. Mother Tongue _____

REGISTRATION DETAILS

15. AIEEE / JEE Application No.

16. JEE / AIEEE / CET Rank

17. Academic Qualifications

Exam.	Name of Institution	Name of Board / Univ.	Year	Div. / Class	%

18. Declaration by the Applicant

I hereby solemnly declare that all the particulars given in this application form are true to the best of my knowledge and belief. After selection and admission in the institutes, I shall abide by the rules and regulations decided by the institute from time to time. In case the particulars furnished by me are found wrong and false, my admission stands cancelled.

Ragging in any form is strictly banned. Anybody found involved in ragging will be punished and may cause expelled from the institute.

Place : Date :

Signature of the Applicant

I certify that the particulars furnished above are correct and I stand guarantee for his/her conduct and character.

Signature of the Parent / Guardian