SAT KABIR INSTITUTE OF TECHNOLOGY & MANAGEMENT Approved by AICTE, Affiliated to MDU, Rohtak Ladrawan, Bahadurgarh (Hr.) **ADMISSION FORM** Recent **Passport** SESSION (20 Size **Photograph** Note:- Fill in Capital Letters and as per Xth certificate Course applied for **MBA BCA B.Tech** Sem M.Tech **BBA** 1. Name of the Candidate 2. Father;s Name 3. Mother's Name 4. Date of Birth Annual Income 5. Nationality 6. Sex Male/Female 7. Region Haryana Out of Haryana 8. Category SC BC OBC GEN ST Others (Specify) 9. Father's Occupation 10. Permanent Address City State Pin Number Whatsapp No. 11. Email. ID 12. Local Guardian's Name Mob. No. 13. JIEEE Roll No. Rank 14. Name of Qualifying Examination Board/Uni. T. Marks G.T. Max. Percentage Obtained Marks

Class	Max. Marks		Marks Obtained				Total			I	Percentage			ge	Board/Uni. Roll No.			
10th																		
12th PCM or other sc. sub.																		
B.Tech																		
Diploma																		
Claim for Scho	larship u	nder Po	ost Ma	tric	scho	lar	ship	/cor	ices	sio	n ye	arly	or a	t In	st. L	eve	ı [
Year			Ro	II N	Ο.]					
Name of Sch	ool/Col	lege la	st att	end	led	& a	ddr	ess	5									
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15. Whether H	lostel Fa	acility i	s requ	ire	d (p	leas	se ti	ick)		Υ	'ES				NO)		
16. Whether T	ranspor	t Facil	ity is r	equ	iired	l (p	leas	se ti	ick)		Υ	ES				NC) [
I/we hereby solemnly declare that all the above information are true to the best of my knowledge. No part is false. I know that in case of false information my admission may be automatically cancelled. I have read all the rules regulations of University/AICTE/Institution. (Signature of Parents)																		
(Signature of Parents) (Signature of Candidate) For Office Use Only																		
Concession/Scholarship approved at Institute level yearly = Rs.																		
Fee receipt n	0			_ A ı	moı	ınt					I	Date	e					
Mode of Payı	ment						_ Tr	ans	. IC									
Admitted in M.Tech/B.tech/Diploma/BBA course (branch) UNDER MANAGEMENT / HSTES COUNSELING or Approved/Provisional/not admitted.																		
Sign. of Accoun Officer	ts	F	ee Appi Auth. S	ovalign.	ĺ	_	Si	gn.	of A	dmis arge	ssio	n		Di	irect	or/P	rinc	ipal
DOCUMENTS REQUIRED/SUBMITTED:- 1. 10th Certificate 2. 12th Certificate 3. Diploma 4. B.Tech 5. 4 Photos 6. Original Migration Certificate 7. Aadhar Card Copy For PMSS Scholarship: - SC/ST/OBC:-																		
(i) Income Ce		•				e (i	ii) B	ank	. De	etail	s cc	ру	(iv	/) D	omi	cile	Сс	ру

ANNEXURE I AFFIDAVIT BY THE STUDENT

l,	S/o,D/o Sh								
Admitted in class	sem	here by	/ declare as :-						
1) Having been admitted to Sat Kabir Institute of Technology & Management have received a copy of the AICTE, DTE/Uni. regulation on Cubing the menace of Ragging in Higher Education Institutions, 2009, (hereinafter called the "Regulation") carefully read and fully understood the provision contained in the said Regulations.									
I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.									
3) I have also, in particular, perused clause 7 adm clause 9.1 of the Regulation and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of conspiracy to promote ragging									
4) I hereby solemnly aware and u									
a) I will not indulge in any behavior or act that may be constituted as ragging under clause 3 or the regulations									
b) I will not participate in or abet or propagate through any act off commission or omission that may be constituted as ragging under clause 3 of the Regulations.									
5) I hereby affirm that, if found guilty of ragging. I am Liable for punishment according to clause 9.0 of the Regulations without prejudice to any other criminal action that may be taken against me under any penal law or any for the act being in force.									
6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of abetting or being part of a conspiracy to promote, ragging and further affirm that, in case that declaration is found to be untrue, I am aware that my admission is liable to be cancelled.									
Undertake on	(day) of	(month)	(year)						
Signature of Candidate Name			Parent's Signature						
	VERIFICAT	ΓΙΟΝ							
Verified that the contents of this affidavit are true to best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therin.									
Verified at (Place)	of this the (day) of(month)(year)						
Signature of Candidate									
Solemnly affirmed and signed in my presence in this the (day on month, (year) after reading the									
contents of this affidavit	my prosonoe in tills	and (day on month	, (your) and reading the						

Authorized Signatory/ Admission Incharge

ANNEXURE I AFFIDAVIT BY THE STUDENT

l,	S/o,D/o Sh								
Admitted in class	sem	here k	oy declare as :-						
1) Having been admitted to Sat Kabir College of Pharmacy have received a copy of the PCI/DTE/Uni. regulation on Cubing the menace of Ragging in Higher Education Institutions, 2009, (hereinafter called the "Regulation") carefully read and fully understood the provision contained in the said Regulations.									
I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.									
3) I have also, in particular, perused clause 7 adm clause 9.1 of the Regulation and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of conspiracy to promote ragging									
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Undertake on	(day) of	(month)	(year)						
Signature of Candidate Name			Parent's Signature						
	VERIFICAT	TION							
Verified that the contents of this affidavit are true to best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therin.									
Verified at (Place)	of this the (day) of(mont	th)(year)						
Signature of Candidate									
Solemnly affirmed and signed in my presence in this the (day on month, (year) after reading the									
contents of this affidavit	, ,	. ()	, (3 - 1 , 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1						

Authorized Signatory/ Admission Incharge