

Fee to be collected: Rs. _____
 Authorized Signature: _____

PROVISIONAL

Bar Code
 PR No
 Prospectus No

Sr. No.: _____



SHAHEED BHAGAT SINGH STATE TECHNICAL CAMPUS
 Moga Road, Ferozepur – 152 004
(Established by the Punjab Government)

**APPLICATION FORM FOR DIRECT ADMISSION (2014) IN
 1st YEAR OF DIPLOMA COURSE**

Applying on the basis of: JET Matric SC Date: __/__/14

Note: Attested copies of certificates to be enclosed along with this Application Form (in order):-
 (1) Matric certificate (DMC) (2) Proof of DOB (if not mentioned in Matric Certificate)
 (3) Residence/Domicile Certificate (4) JET scorecard (if applicable)

<p>➤ FILL ALL THE INFORMATION IN CAPITAL LETTERS</p>	(Paste recent Attested passport size Photograph)
<p>➤ WRITE NAME, FATHER'S NAME AND MOTHER'S NAME AS PER 10TH CERTIFICATE</p>	
<p>➤ ATTACH 6 PP SIZE PICS OF STUDENT ALONG WITH THIS APPLICATION FORM</p>	

1. Name of the Student:	2. Male/Female:
3. Father's Name: Sh.	4. Category:
5. Mother's Name: Mrs.	6. Blood Group:
7. Date of Birth(DD/MM/YYYY): / /	8. Email ID:
9. JET Rank: JET Roll No:	10. Hosteller / Day Scholar:
11. 10 th Marks: Marks Obtained / Max Marks	12. %age (Matric):
13. Mobile Student→ Mobile Father→ Mobile Mother→	
14. Aadhar Card (UID No.): Bank A/c No: Bank Name:	
15. Parent's Permanent Address:	
16. Distt: State: PIN: Phone (with STD):	
17. Any Faculty / Staff member in this college known to you: Name: Designation: Deptt:	
18. Any Student in this college known to you: Name: Course: Branch: Roll No: Year:	
19. Write discipline wise order of preference: 1st : ____ 2nd : ____ 3rd : ____ (Comp Engg, EE, ECE, ME)	
19. How did you learn about this Direct Admission: _____ (Name of Newspaper)	

The information given above is true and correct to the best of my knowledge and belief and nothing relevant has been kept concealed therein. I undertake to abide as per above and college rules.

Date: _____ (Signature of student)

For Office Use only (Provisional)

Student is Eligible / Not Eligible: _____ Signature: _____

Attested Certificates enclosed: (* means 'If applicable')

a) Matriculation Certificate (DMC) <input type="checkbox"/>	b) * JET Admit Card <input type="checkbox"/>
c) * Proof of JET Rank <input type="checkbox"/>	d) Proof of DOB <input type="checkbox"/>
e) Medical Fitness Certificate <input type="checkbox"/>	f) Residence Certificate <input type="checkbox"/>
g) * Gap Certificate <input type="checkbox"/>	

Total No. of Certificates attached _____

Discipline allotted (provisionally): _____

Fee Amount: _____ Receipt No.: _____ Date: _____ Signature (Cashier): _____

Signature of Admission Committee: 1. _____ 2. _____
 3. _____ 4. _____ 5. _____