



NIIT

GROUP OF INSTITUTE

ADMISSION FORM

Institute Name				
Course				
Admission Year		Admission Date		Regd. No.

Student Name			
Father's Name			
Mother's Name			
Gender			
Date of Birth			
Mobile No			
Email			
Category		Religion	
Identity Type		Idnumber	
Marital Status			
State		District	
Address			

ACADEMIC DETAILS				
Examination	Year Of Passing	Board/University	Percentage/CGPA	Subjects
10Th				
Sr. Secondary				
Graduation				
Post Graduation				
Others				

Declaration by the student

I here by declare that, the information furnished herein above is true and correct to the best of my knowledge and belief. I further declare that the attested photocopies of the certificates submitted by me. At time of admission are the true copies of found incorrect, at any stage, I agree to forgo the fee deposited and also the claim for admission.

Place:-.....

Signature of Student