

(c) Mobile No.:

Land Line No. (along with STD Code)

(d) Email-Id:

3(a) Local Guardian's Name Mr/Ms.:

(b) Address:

 PIN Code

(c) Mobile No.:

Land Line No.: (along with STD Code)

(d) Email-Id:

4(a) Details of Fees: Cross (X) the appropriate box only. Attach Xerox copy of fee receipt/draft.

Challan Draft (Draft should be in favour of Director MITS, Payable at Gwalior)

(b) Challan/Draft No. : Date:

Amount (Rs.)

Name of the issuing Bank & branch in case of Demand Draft _____

DECLARATION

I hereby declare that the information given above is correct to the best of my knowledge and belief. In the event of any information found incorrect or misleading my admission will be liable to be cancelled by the University/Institute at any time. I understand that my registration for the said class/course is purely provisional subject to eligibility norms of university/Institute. I will attend my classes regularly (as per academic calendar of the institute) and in case I don't comply with the attendance requirement of RGPV norms (minimum 75%) I may be debarred from appearing in the mid semester and/or end semester examinations. Further, I will not indulge myself in ragging or any other act of indiscipline. If I am found involved in any such act of indiscipline, suitable disciplinary action may be taken against me which may even lead to my expulsion from the institute.

Further, I declare that in case of any change in my address, cell number/parent address, cell number, I will inform to the co-ordinator/Director immediately in writing.

Signature of Candidate :

My ward will abide the rules & regulation of the institute

Signature of the Parent :
Name :
Cell No. :

Date: