

INSTITUTE OF GENETIC ENGINEERING



Approved by Government of West Bengal Affiliated to Maulana Abul Kalam Azad University of Technology
(Formerly known as West Bengal University of Technology) Recognized by UGC

APPLICATION FORM

Application No:

[To be filled by the Institution]

Academic Session: 2018 - 19

Admission For: Under Graduate
 Post Graduate (Put ✓ Mark)

Subject / Course Name: _____



[1]. PERSONAL DETAILS

- i. Name (Block Letters):** _____
- ii. Date of Birth (dd/mm/yyyy):** _____
Age: _____ yrs. **Sex:** Male Female (Put ✓ Mark)
Blood Group: _____
- iii. Nationality:** _____ **Religion:** _____
- iv. Marital Status:** Married Unmarried (Put ✓ Mark)
- v. Father's Name:** _____
- vi. Father's Occupation:** _____ **Qualification:** _____
- vii. Mother's Name:** _____
- viii. Mother's Occupation:** _____ **Qualification:** _____
- ix. Category:** General SC ST OBC (Put ✓ Mark)
- x. Physically Challenged:** MC Disabled (40% & above)
[Put ✓ Mark if necessary]
- xi. AADHAR No.:** OR
Passport No.: _____
(For the Candidates who do not have AADHAR)
- xii. Languages known:** English Bengali Others: _____

[2]. ACADEMIC DETAILS

i. Graduation [*For post graduate candidates only*]

Name of Degree: _____ **Stream:** _____

Name of the Institution/College: _____

Name of the University: _____

Year of passing: _____ **Marks (in %):** _____

ii. 10 + 2 Standard

Name of the Institution/School: _____

Name of the Board/Council: _____

Year of passing: _____ **Marks (in %):** _____

Marks Details:

Subjects	Marks in %
<input type="checkbox"/> Physics	
<input type="checkbox"/> Chemistry	
<input type="checkbox"/> Mathematics	
<input type="checkbox"/> Biology	
N.B. Please do select the subjects those you had in your 12 th standard and fill the Marks section.	

iii. 10th Standard

Name of the Institution/School: _____

Name of the Board/Council: _____

Year of passing: _____ **Marks (in %):** _____

[3]. CUMMUNICATION DETAILS

i. Permanent Address: _____

_____ Pin _____

E-mail id: _____

Fax/Mobile: _____

ii. Local residential address (if any): _____

_____ Pin _____

E-mail id: _____

Fax/Mobile: _____

iii. Name, Address & Ph. No. of Local Guardian (if any): _____

_____ **Ph. No.:** _____

[4]. PAYMENT DETAIL

- i. Demand Draft No. / Pay Order No.: _____
- ii. Dated: _____

Declaration of the Candidate

I hereby declare that the details given above by me are true and correct to the best of my knowledge. I also declare that in the event of discontinuation of study in this Institute I shall not claim refund of any fee (Except Laboratory Caution Deposit) paid by me for any reason.

*I also do hereby declare that I am fully aware of the guide lines of the **Honorable Supreme Court of India** regarding **Ragging and the Statutory Punishment** to which a student shall be liable if found guilty of ragging. I shall neither indulge in ragging activities nor shall take part in any type of ragging.*

Counter Signature of the Guardian

Signature of the Candidate

Date: _____

Place: _____

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**FOR OFFICE USE ONLY**

**STUDENT'S ID:** \_\_\_\_\_

**ROLL NO:** \_\_\_\_\_

**DEGREE:**  B. Sc.  BCA  M. Sc.

**SUBJECT:** \_\_\_\_\_

**Counseled By:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

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N.B. *After receiving the application form, the institute will generate a reference number for every relevant application & the same will be sent to the candidate via SMS or e-mail. This reference number will be used for further admission process and the candidate may use this for his/her query regarding application status.*