



केन्द्रीय प्रौद्योगिकी संस्थान कोकराझार  
CENTRAL INSTITUTE OF TECHNOLOGY KOKRAJHAR

Deemed to be University, MHRD, Govt. of India  
Kokrajhar, BTAD, Assam 783370

[www.cit.ac.in](http://www.cit.ac.in)

Ref. CIT/NOTICE/ADMISSION/2019/67

Date: 30/08/2019

List of candidates selected for admission into various M. Tech programme through special round held on 30<sup>th</sup> august 2019.

Sl. No.	ROLL NUMBER	NAME OF CANDIDATE	SPECIALIZATION
1	22134201	JAFUNGSHA GAYARI	Water Resources and Hydraulic Engineering
2	22134202	NITYA SUNDAR BASUMATARY	Green Energy Technology
3	22134204	HARI BHUSAN DEBNATH	Green Energy Technology
4	22134205	ULLASH ROY	Green Energy Technology

The selected candidates are hereby asked to report to the admission cell on 2<sup>nd</sup> September 2019, 9:30 am along with the Admission forms and documents mentioned below. The eligibility criteria for admission is as per AICTE norms. The admission and other forms are attached herewith the notice to be downloaded and duly filled by the candidate.

List of documents to be submitted at the time of admission:

1. Photocopy and original copy of the Mark-sheet of the HSLC Examination or equivalent.
2. Photocopy and original copy of the Mark-sheet of the 10+2 Examination or equivalent.
3. Photocopy and original copy of the Mark-sheet of Undergraduate Examination.
4. Photocopy and original copy of the Age Proof Certificate (Birth Certificate or HSLC Admit Card/Pass Certificate).
5. Migration certificate in original.
6. Photocopy and original copy of the Pass certificate of qualifying examination (undergraduate).
7. Photocopy and original copy of the Permanent Residential Certificate (PRC) issued by competent authority.
8. Photocopy and original copy of the Caste Certificate issued by competent authority (for SC/ST/OBC candidates only).
9. Conduct Certificate from the Institution last attended.
10. Four passport size photos.
11. Medical Fitness certificates for General fitness issued by Government Medical Officer and for vision issued by a certified Eye Specialist.
12. Gap Certificate (if applicable).

Member Secretary,  
Admission Committee

# CENTRAL INSTITUTE OF TECHNOLOGY KOKRAJHAR

## ADMISSION FORM

**FOR M. TECH/M. DES PROGRAMME – 2019**

(TICK THE PROGRAMME APPROPRIATELY)

**Page 1**

<b>FOR THE CANDIDATE</b>	<b>NAME (IN BLOCK LETTERS)</b>														
	<b>Name of Father/Mother/Guardian</b>														
	<b>Program Applied for</b>														
	<b>Name of Institution last Attended</b>														
	<b>Reservation Category</b> <i>(GEN/ OBC/ SC/ST/ PWD)</i>		<b>Permanent Residence Region</b> <i>(BTAD/NE/ALL INDIA)</i>												
	<b>Date of Birth</b> <i>(DD/MM/YY)</i>		DAY	MONTH	YEAR	<b>Age as on 1<sup>st</sup> August, 2019</b>		Year	Month	Day					
	<b>Overall Percentage (%) in HSLC</b>					<b>Roll number as given in CIT Admit card</b>									
	<b>Overall Percentage (%) in 10+2 or equivalent</b> <i>(Science/Commerce/Arts/Others)</i>														
	<b>CGPA or equivalent percentage of marks obtained in B.TECH/B.DES or equivalent</b>					<b>Name of Discipline in UG Program</b>									
	<b>Address for Correspondence:</b>														
<b>Full Signature of Candidate (With Date)</b>															

**DETAILS OF CERTIFICATES/DOCUMENTS SUBMITTED**

**Name of Candidate (BLOCK LETTER):**  
(To be filled by Candidate)

<b>FOR OFFICE USE ONLY</b>	Age Proof Certificate	Tick	Remarks:
	HSLC/ Equivalent Mark sheet	Tick	
	10+2/Equivalent Mark sheet	Tick	
	B. Tech/B. Des/Equivalent Mark sheet & Pass Certificate		Signature of Dealing Assistant(with Date)
	Registration/Migration Certificate	Tick	Remarks:
	Permanent Residence Certificate (PRC)	Tick	
	Caste Certificate (SC/ST/OBC) – if applicable	Tick Tick	Remarks:
	Conduct Certificate	Tick	
	Medical Fitness Certificate (General fitness)	Tick Tick	
	Person with Physical Disability Certificate (if applicable)	Tick	
	Gap Certificate (if applicable)	Tick	
	Income and Asset Certificate for EWS Candidates	Tick	
	Others	Tick	

**FOR OFFICE USE ONLY**

**Name of Program:** \_\_\_\_\_

**Roll No:** \_\_\_\_\_

Chairperson/Convener,  
Admission Committee,  
CIT, Kokrajhar

Signature of Candidate (with Date)



## CENTRAL INSTITUTE OF TECHNOLOGY KOKRAJHAR

## ADMITTED STUDENT'S INFORMATION FORM

First Name:																																					
Middle Name:																																					
Surname/Family Name:																																					
Mother's Name:																																					
Father's Name:																																					
Residential Phone No.:																				Mobile No.:																	
Gender(Male/Female):																				Date of Birth (dd/mm/yy):																	

Address for Communication: \_\_\_\_\_  
 \_\_\_\_\_  
 Dist.: \_\_\_\_\_ State: \_\_\_\_\_  
 PIN: \_\_\_\_\_ Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Permanent Address for Communication: \_\_\_\_\_  
 \_\_\_\_\_  
 Dist.: \_\_\_\_\_ State: \_\_\_\_\_  
 PIN: \_\_\_\_\_ Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Local Guardian's Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Dist.: \_\_\_\_\_ State: \_\_\_\_\_  
 PIN: \_\_\_\_\_ Contact no.: \_\_\_\_\_

Programme of Study: Engineering & Technology  
 Course/Branch : \_\_\_\_\_  
 Level (Diploma/Undergraduate): \_\_\_\_\_ Date of joining (dd/mm/yy): \_\_\_\_\_  
 Admitted to (Diploma/B.Tech./B.Des./M.Tech/M.Des): \_\_\_\_\_  
 Roll No: \_\_\_\_\_

Email ID: \_\_\_\_\_  
 Religion (Hindu/Muslim/Christian/Sikh/Buddhist/Jain/Other): \_\_\_\_\_  
 Caste (General/OBC/SC/ST/SBC/VJ/NT-DT/Others): \_\_\_\_\_  
 Reserved Category (Yes/No): \_\_\_\_\_ Physically Handicapped (Yes/No): \_\_\_\_\_  
 Economic Backward (Yes/No): \_\_\_\_\_ Residence during Study (Home/Hostel): \_\_\_\_\_  
 Institute fees paid: \_\_\_\_\_ Hostel fees/month: \_\_\_\_\_

**Educational Qualification: (Fill whichever is applicable)**

Examination	Year of passing	Division	% of Marks (Aggregate)	Board/Council	Name of Institution (School/College) last attended
HSLC (Metric)					
10+2					
Diploma					
B.Tech					

**Declaration:**

I, \_\_\_\_\_, hereby declare that the information furnished in this Form is true to the best of my knowledge and belief. I understand that, in case of any discrepancy detected at any time, my admission shall be liable to be cancelled.

Parent's/Guardian's Signature

Date: \_\_\_\_\_

Candidate's Signature

Date: \_\_\_\_\_

# HOSTEL APPLICATION FORM, CIT KOKRAJHAR

## FOR DIPLOMA/B. TECH/B.Des STUDENTS

### A. PERSONAL DATA: (Tick/Strikeout whichever/wherever necessary)

(1) Name of the Candidate: (Capital Letters).....

(2) Home Address: Vill/Town: .....PO: .....

Ward No:.....Dist:.....State:.....PIN:.....

Applicant's Tel No. (M)..... (Email ID).....

(3) Mention Approximate distance from Home Address to the Institute.....Kms

Paste a recent  
passport size  
Photograph

(4) Date of Birth :( DD/MM/YY)..... (5) Nationality:

Indian	Foreigner
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(6) Sex:

Male	Female
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(7) Food Habit:

Vegetarian	Non-Vegetarian
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### B. ENROLMENT DATA:

(1) Admitted into:

M.Tech.
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(2) Specialization: .....

(3) Branch:

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Year:

1st	2nd	3rd	4th
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Roll No:

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(4) Are you already Border of CIT Hostel?

Yes	No
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If Yes, Name of Hostel.....Wing No:.....Room No.....

If No, Mention present Year and with Semester.....(Whether: Regular student / Year Back Student)

### C. ACADEMIC QUALIFICATIONS:

Sl No.	Name of Exam Passed	Name of the Board/University	Name of the Institute	Year of Passing	Division/Class	% of marks obtained
1	10 <sup>th</sup>					
2	Diploma					
3	12 <sup>th</sup>					
4	B.Tech.					

### D. DECLARATION BY THE CANDIDATE:

I,.....hereby,declare that the information given above is true to the best of my knowledge and if any information furnished above is found incorrect, my admission is liable to be cancelled/expelled from the hostel and I shall abide by the rules and regulations of the hostel and the Institute.

Date:

### E. FAMILY DATA:

Signature of the Candidate.

(1)Full name of the Parent/Guardian: ..... (2) Relationship: .....

(3) Occupation: ..... (4) Office Address: .....

(5) Designation: ..... (6) Residential Address: Vill/Town: .....

PO :.....Dist: ..... PS.....State : ..... PIN :.....

Email ID :.....Tel. No. (With STD Code).....Mobile No: .....

### F. NEAREST LOCAL GUARDIAN:

Name and address of the person who should be contacted (in case of emergency):

Name:.....Address: .....

.....PIN.....

Tel. No.. (With STD Code) ..... Mobile No : .....

### G. DECLARATION BY THE PARENT/GUARDIAN:

I,.....father/mother/guardian of Sri/Ms. .... hereby declare that the statements furnished by my son/daughter are true to the best my knowledge and belief. I shall not interfere any decisions opted by the Institute against him/her found violation of rules and regulations or any misconduct.

Date:

Signature of the Parent/Guardian

### For office use only

Name of the Hostel allotted:

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Room No.

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Date of Admission into Hostel:

--

Date:

Signature  
(I/c-Hostel Seat Allotment)

**APPLICATION FORM FOR IDENTITY CARD**

**CARD NO:**

[Empty box for Card No.]

(TO BE FILLED IN BY OFFICE)

**FILL UP IN BLOCK LETTERS**

1. NAME OF STUDENT:.....

2. CLASS: 1<sup>ST</sup> / 2<sup>ND</sup> / 3<sup>RD</sup> / 4<sup>TH</sup>

3. PROGRAMME: M.TECH

(TICK APPROPRIATELY)

4. SESSION: 2019-20

5. ROLL NO:.....



6. SPECIALIZATION: \_\_\_\_\_

7. IDENTIFICATION MARK.....

8. BLOOD GROUP:.....

9. DATE OF BIRTH:.....

10. PERMANENT ADDRESS:-

FATHER'S NAME: .....

MOTHER'S NAME: .....

HOUSE/NO: .....

VILL/ WARD/NO: .....

CITY/TOWN: .....

P.O.: .....

P.S.: .....

DISTRICT: .....

STATE: ..... PIN:.....

MOBILE NO: ..... EMAIL ADDRESS:.....

11. DECLARATIONS:

*I, Mr/Ms..... HEREBY DECLARE THAT THE INFORMATION FURNISHED IN THIS IDENTITY CARD APPLICATION FORM IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.*

12. FULL SIGNATURE: