

**KESHAV MEMORIAL INSTITUTE OF TECHNOLOGY (KMIT)
NARAYANAGUDA, HYDERABAD – 500 029.**

Approved by AICTE, New Delhi & Affiliated to JNTU, Hyderabad.
Ph: 23261407 Cell: 9849208091 e-mail: snitin@kmit.in

Keshav Memorial Educational Society

MBA / MCA APPLICATION FORM (2009-10)

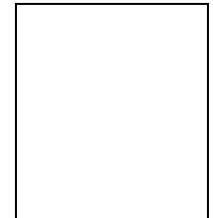
B' Category / NRI – Management Seats

For Official use only

B'Category: _____
(NRI/Resident of A.P. / other State)

Sl. No. _____

Course : MBA / MCA..... Received by:



Photo

To be filled by the candidate

Enclose Xerox copies of all Certificates

1. FULL NAME (in Block Letters) : _____
As per SSC

2. Father's Name / Guardian's Name : _____
(if father is not alive)

3. Home State(NRI/AP / other state) : _____

4. Date of Birth as per SSC : _____ (5) Age (as on 1- 7- 09)_____

6. Mother tongue : _____(7) Nationality_____

8. Religion : _____(9) Gender _____

10. Profession of Father/Guardian : _____

11 Address for Correspondence : _____
With Land Mark

Pin:_____

E – mail :_____

Phone:(R) _____

(O) _____

Mobile :_____

12. Permanent Address : _____

Pin_____

Phone:_____

Mobile:_____

Exam Passed	Total Marks Secured	Max Total Marks	Percentage of Marks Secured	Class/ Division	School / College
SSC Equivalent			%		
Inter / Equivalent			%		
Degree B.com / B.Sc.....			%		

I - CET -- 2009 PARTICULARS (MBA / MCA).....

RANK_____

TOTAL MARKS_____

H.T. No: _____

CATEGORY: SC / ST / BC / OC _____

LOCAL : OU / AU / SVU _____

The statement made above are true and no information is suppressed. I promise to abide by the rules and regulations of the college and University.

Date: _____

Signature of the candidate

Declaration To be signed by Father / Guardian

I agree for my son's / daughter's / ward's admission into the I Year of MBA/MCA..... in Keshav Memorial Institute of Technology. I shall be responsible for the payment of all his / her fees and charges and for his / her good conduct and behaviour during the period of his / her college career. I will not claim any refund of tuition / other fees paid in the event of my son / daughter leaving the college during the course of study for any reason whatsoever. I agree to pay all dues in full in case I leave the college.

Date:

Signature of Father / Guardian