

Form	F/ADMN/03
REV.No	00
Issue	15/02/10

Form No:-

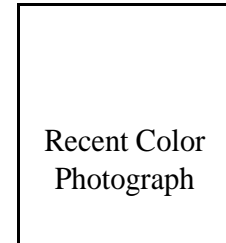
**Mahatma Gandhi Mission's
JAWAHARLAL NEHRU ENGINEERING COLLEGE,
N-6, CIDCO, AURANGABAD-431 003.
Phone: 0240-2482893, Fax-0240-2482235
(Provisional Registration Form for Admission to Post Graduate Engineering Course)**

Name in Full: _____
(In Capitals) Surname First Name Father's Name

Date of Birth: _____ Blood Group: _____

Sex: _____ Nationality: _____

Cast Category: _____ Email ID: _____
(Open/SC/ST/VJ/NT1/NT2/NT3/OBC/SBC)



Address for _____ Phone No: _____
Correspondence

_____ Mobile No of Parents: _____

**th
Details of SSC (10 Exam)**

Board _____ Month and year of passing _____

Marks Obtained _____ Out of _____ Marks in Mathematics _____ Out of _____

**th
Details of HSC (12 Exam)**

Board _____ Month and year of passing _____

Marks Obtained _____ Out of _____ Marks in Mathematics _____ Out of _____

Details of B.E. / Graduate Exam

University _____ Month and year of passing _____

Marks Obtained _____ Out of _____

Details of Entrance Test

GATE 2016 (Valid score) Seat No. _____ Score _____ Year _____

GATE 2017 Seat No. _____ Score _____ Year _____

Enclosures: (Attach Photocopies)

SSC Marks Memo	<input type="checkbox"/>	HSC/Diploma Mark Memo	<input type="checkbox"/>	B.E. Transfer Certificate	<input type="checkbox"/>
Caste Certificate	<input type="checkbox"/>	Caste Validity Certificate	<input type="checkbox"/>	Non-Creamy Layer Cert.	<input type="checkbox"/>
Migration Certificate	<input type="checkbox"/>	Domicile Certificate	<input type="checkbox"/>	Gap Certificate	<input type="checkbox"/>
Age/Nationality	<input type="checkbox"/>	GATE Score Card	<input type="checkbox"/>		

UNDERTAKING:

I, the undersigned declare and hereby affirm that the information furnished by me is correct and true to the best of my knowledge. In case of any detection of providing false information intentionally, I will be liable to the consequences. It is also declared that the address given for correspondence is of a responsible person/relative.

Signature of Parent / Guardian

Signature of Student

For Office Use Only :

Received Rs. _____ By Cash/DD No. _____ dated _____ drawn on Bank _____

Place:

Date:

Receiver's Signature

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