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APPLICATION FORM

Program Preference (All fields are mandatory)

School of Engineering & Technology

BTech* BTech Lateral

* Please indicate order of preference for the branch by writing 1,2,3,4,5 in the circle given below:

- Civil Engineering
- Mechanical Engineering
- Electrical Engineering
- Computer Science & Engineering
- Electronics & Communication Engg.
- MTech (Civil Engineering)
- MTech (Mechanical Engineering)

School of Social Sciences

- MSW
- MA (Sociology)
- BSW
- BA (Sociology)
- Int. BSW - MSW
- Int. BA - MA (Sociology)

School of Business

- MBA
- MBA (Hospital Administration)
- MBA (Construction & Urban Infrastructure Mgmt.)
- MBA (Business Entrepreneurship & Management)
- MBA (Tourism Management)
- MBA (Logistics & Supply Chain Management)
- MBA (Banking & Financial Services)
- MBA (Event Management)
- MCom
- BCom
- BBA
- BBA (Tourism & Hospitality Management)
- Int. BBA - MBA
- Int. BCom - MBA

School of Health Sciences

- BSc (Advance Imaging Technology)
- BSc (Medical Laboratory Technology)
- BSc (Operation Theatre Technology)
- BSc (Trauma, Emergency & Disaster Management)

School of Basic Sciences

- MSc (Physics)
- MSc (Chemistry)
- MSc (Mathematics)
- Int. BSc - MSc (Physics)
- Int. BSc - MSc (Chemistry)
- Int. BSc - MSc (Mathematics)

School of Computing Sciences

- MCA
- MCA - L
- M.Sc (IT)
- BCA
- Int. BSc - MSc (IT)

Personal Details (All fields are mandatory)

Name : _____	Category : <input type="checkbox"/> General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC / MOBC
Date of Birth : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Religion : _____	Marital Status : <input type="checkbox"/> Single <input type="checkbox"/> Married
Nationality : _____	Gender : _____
Student's Email: _____	Student's Phone No.: _____
Father's Name : _____	Father's Ph. No.: _____
Mother's Name : _____	Mother's Ph. No.: _____
Guardian's Name: _____	Guardian's Ph.No.: _____
Guardian's Email: _____	Parent's Email: _____

Correspondence Address (All fields are mandatory)

Address : _____

 Town/City : _____
 District : _____ State : _____
 Pin : _____ Country: _____

Permanent Address (All fields are mandatory)

Address : _____

 Town/City : _____
 District : _____ State : _____
 Pin : _____ Country: _____

Educational Qualification Details (All fields are mandatory)

Qualification	School/College/Institution	Main Subjects/ Degree (Major/Branch)	Year of Passing	Board/University	Grade/ Percentage/CGPA
Class X					
Class XII					
Diploma/ Graduation					
Post Graduation					

Work Experience (if any) : _____

Entrance Test Details (if appeared)

Name of the Test	Month & Year of Passing	Percentile/Score	Rank

Achievements / Co-curricular Activities (if any) : _____

What brought you to Kaziranga University :

- Hoardings TV Ads Radio Newspaper/Magazine Friends (Mention Name) : _____
 Recommendation by students Others (Please Specify) : _____

Facilities Required

Hostel Transportation

** Please fill the Hostel and Transportation Requisition Forms separately if required.

Declaration

I declare that I shall abide by the Rules and Regulations of Kaziranga University which will be in force from time to time. I submit myself to the disciplinary jurisdiction of the Vice Chancellor and the several bodies in Kaziranga University who may be vested with the authority to exercise discipline under the Act, the Statutes, the Ordinance and the Rules that have been framed thereunder by university.

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me and that all the statements made in this application are true and complete to the best of my knowledge and belief. I understand that the competent authority can take appropriate action against me in case of any of the information being found to be incorrect at any stage.

Date :

Signature of the Applicant