

Ansal Institute

Pioneered by IITians

Sector-55, Gurgaon-122 003, Haryana, INDIA
Tel: 0124-4116111, 4750400 Fax: 0124-4116411

Website: www.aitgurgaon.org Email: admissions@aitgurgaon.org

Form No: (for office use)
CT:.....
AC initials.....

APPLICATION FORM (2011-12)

Candidates, who have appeared in the qualifying examination and whose results are awaited, may also apply. Such candidates will be considered for provisional admission subject to submission of relevant documents satisfying eligibility conditions.

Candidates are required to submit two sets of photocopies of each of the following documents along with the application form:

- > Certificates of X, XII and Bachelors Degree (if applicable)
- > Marks sheet of X, XII and Bachelors degree (10+2+3/ 10+2+4) (if applicable)
- > Transfer Certificate
- > Migration Certificate
- > Medical Certificate

At the time of admission, original certificates are required to be submitted to the Institute.

The application form will be considered only after the application fee is received

Photograph

1. Program applied for (Put a cross [X] inside the box):

Under Graduate leading to:

- BS (Computer Engg.)
- BS (Electrical Engg.)
- BS (Mechanical Engg)
- BS (Industrial Engg)
- BS (Computer Science)
- BS (Biotechnology)

- BS (Business Admin)
- BS (Computer Info. Systems)
- BS (Hotel Mgmt.)
- BS (Retail Mgmt.)
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Post Graduate leading to:

- PGDM-AIMA
- PGCM-AIMA
- MBA International
- MS (Computer Science)
- MS (Information Systems)
- MS (Software Engineering)
- PG Program (Real Est.Mgmt)
- PG Program (Facility Mgmt)

2. Details of Demand Draft (Rs.1500/-) in favour of "Ansal Institute of Technology" payable at Delhi (Please write your name, father's name, program name on the back side of the DD)- Non Refundable Application and Processing Fees.

DD# Date Amount Bank

3. Candidate's Name (In CAPITAL) (as in Matriculation certificate)

First Name Middle Name (if any) Surname

4. Date of Birth (in Christian era): Day Month Year

5. Nationality: Indian / Other (Specify)

6. Sex: Male Female

7. Candidate's Email: Mobile:

8. Address for correspondence with Parents (in CAPITAL):

.....
.....
EmailMobile

(It is the sole responsibility of the candidate/ Parents to provide written intimation to the Registrar's office in case of any change in the above mentioned contact details)

9. Name of the Parents and office addresses (In CAPITAL)

Father:		Mother:	
Profession/ Designation:		Profession/ Designation:	
Office Address:		Office Address:	
Email:		Email:	
Tel. / Mobile:		Tel. / Mobile:	

* Email/Mobile of either parent is a must.

10. Academic Record:

Class	School / Institution	Board	Year of Passing	Subjects	% Marks	% Aggregate
Class X						
Class XII						

Graduation (10+2+3 / 10+2+4)

Name of Degree: -----
College / Institution: -----
University: -----
Year of Passing: -----

% Marks	Year I		Year II		Year III		Year IV	
	Sem I	Sem II	Sem III	Sem IV	Sem V	Sem VI	Sem VII	Sem VIII
	Aggregate%							

11. Other Qualifications:

1. AIEEE / CAT / MAT/ others (.....) Score
2.

12. Work Experience:

Duration	Organization	Role

Declaration by the applicant

I declare that the above information supplied by me in this application form is correct to the best of my knowledge.

Date ____/____/____ Place: _____

Signature of the candidate: _____