Thangal Kunju Musaliar Institute of Technology

Musaliar Hills, Karuvelil P.O, Ezhukone, Kollam – 691 505 Ph: 0474 – 2482833, 2482083
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APPLICATION FORM FOR M.TECH.ADMISSION 20…...

Application No……

1. Courses to which admission is sought

☐ VLSI & Embedded Systems (EC)
☐ Software Engineering (CS)
☐ Opto- Electronics Engineering (EC)
☐ Computer Information Science (CS)
☐ Signal Processing (EC)

2. Name of the candidate (In Block Letters)

3. Gender Male ☐ ☐ Female

Photo

4. Name of father/guardian

5. Name of mother

6. Occupation of father

7. Occupation of mother

8. Date of birth d d m m y y y y

9. Nationality ☐ Indian ☐ Other

10. Mother tongue

11. Blood group

12. Permanent address

Pin Telephone No.
Mobile No.

13. Communication address

Pin Telephone No.
Mobile No

14. Religion

15. Caste

16. Indicate the category, in case you belong to one of the following

SC ☐ ST ☐ OEC ☐ EZ ☐ MU ☐ LC ☐ BX ☐ BH ☐

17. Name of Institution attended for UG, with place

18. Academic Details:
(a) Qualifying Degree examination details:

Name of Degree	Branch/Discipline	% of Marks	Class/ Discipline	Year of Passing	Name of Institution and Address	Board/ University

(b) Qualifying examination – Semester Marks

SEM/YEAR	SEM I	SEM II	SEM III	SEM IV	SEM V	SEM VI	SEM VII	SEM VIII	TOTAL
Maximum									
Scored									
Percentage									
No.of attempts made									

19. GATE Roll No. Score

20. Have you received any state/district level awards or other recognition? ☐ Yes ☐ No

Give details…….

DECLARATION

I declare that the particulars furnished above are true to the best of my knowledge and belief

Place: Date:

Signature of the candidate Signature of Parent/Guardian

FOR OFFICE USE ONLY

Admitted to: **Admission Number**

Details of Fee Paid:

Amount Rs: Receipt No. : Date:

Remarks: **PRINCIPAL**