



राष्ट्रीय प्रौद्योगिकी संस्थान, मणिपुर

National Institute of Technology, Manipur

Langol, Manipur – 795 001, Ph. (0385)2445812/ e-mail: nitmanipur.ac.in

An Autonomous Institute under MHRD, Govt. of India

TO BE FILLED IN BY THE CANDIDATE

Photo
Graphs
UPLOAD

1. Name of Programme :.....

2. Branch/Specialization/Semester:

.....

3. Name of the candidate.....

(in block letters)

4. Student's Enrolment No.....

5. Date of Birth.....

6. Gender: (Tick)

Male	Female
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7. Category (Tick)

OPEN	OBC	SC	ST	PWD
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8. Blood Group:..... :.....

9. Father's name (in block letters) & Occupation.....

10. Mother's name.....

11. Address

<i>Permanent</i>	<i>For Correspondence</i>
Mobile No: E-mail: PS	Mobile No: E-mail: PS

DECLARATION OF THE CANDIDATE

I, Mr./Ms., certify that the information given above are correct/true to the best of my knowledge. If anything proves to be incorrect my admission may be cancelled. If admitted I shall abide by the Institute rules and regulations.

Date:

Place:

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Signature of the candidate

ACKNOWLEDGMENT

This is to certify that Mr/Ms..... has admitted for course B.Tech/
M.Tech in NIT Manipur for academic session 2015-2016.

Branch:.....

Enrollment No

Hostel payment (amount).....

Signature

Admission In charge
BTech/M.Tech