



IDEAL INSTITUTE OF TECHNOLOGY
VIDYUTNAGAR, KAKINADA
'B' Category Application

Name of the Candidate :

Branch: Civil / EEE / Mechanical / ECE / CSE

Date of Birth:

Sex: Male Female

Affix Photo

Caste: (SC/ST/BC/OC) :

Sub Caste:

Category :

Convener / Management

Fee Reimbursement :

Yes / No (Tick)

Aadhaar Number :

Name of the Father :

Name of the Mother :

Occupation :

Address for Communication :
With Pin Code.

Email ID :

Phone No:

Mobile No (Self) :

Mobile No. (Parent)

Academic Qualifications:

Examination	Year of Passing	Board/ University	Group	Aggregate %	Group %	EAMCET Rank	EAMCET Hall Ticket Number
X Class or Equivalent							
Intermediate or Equivalent							

Particulars of continuous Education :
 (from 6th Class to 10th)
 (Name of the School and Place)

Intermediate :
 (Name of the Junior College / School and Place)

Signature of the Candidate

Declaration of the Candidate

I declare that all the above information is true and correct. I agree to abide by the rules and regulation of the Ideal Institute of Technology, Kakinada, University, and the State Government regarding the Admissions, Code of Conduct and Penalties. I assure that the decisions of the Management and Principal of the College in matters of my study, conduct and discipline are binding on me. I declare that I will not participate in any activity against the interest and discipline of the Institute, or indulge in Ragging, Eve teasing etc., failing which the Institute can issue T.C. to me. In case of breach of rules, code of conduct of ragging, I agree to obey and accept the disciplinary action or punishment without challenging the same.

Station :

Date :

Signature of the Candidate

Declaration of the Parent / Guardian

I declare that the particulars given by my son/ daughter / ward are true and correct. If any information given above is proved false at a later date, I agree to forfeit admission given to him/her. I shall be responsible for the payment of all the fees and other charges due from him/her during his/ her study in the Institute. I shall take whole responsibility and compensate for any damages or losses caused by him/her. In case of breach of rules, code of conduct, Ragging, Eve teasing etc., I agree to obey and accept the disciplinary action or punishment given to him/her without challenge the same.

Station :

Date :

Signature of the parent / Guardian