

CANDIDATE REGISTRATION FORM

Note: All entries must be filled by the candidates himself/herself in Capital Letters.

Academic Details

Please Paste
latest Passport
Size Self-
attested
Photograph

Do Not Staple

Signature of
Applicant

Admission Session/ Year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
Admission Batch	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
Application Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Medium	<input type="text"/>	<input type="text"/>				
Academy Name	<input type="text"/>										
Course Name	<input type="text"/>										
Course Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
Course Duration	<input type="text"/>	<input type="text"/>	Year	<input type="text"/>	<input type="text"/>	Month	Mode	<input type="text"/>	Regular	<input type="text"/>	Distance
ASTC (Center) Name	<input type="text"/>										

Personal Details

Candidate Name	<input type="text"/>																
Father Name	<input type="text"/>																
Mother Name	<input type="text"/>																
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Age	<input type="text"/>	<input type="text"/>	Gender	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Other	<input type="checkbox"/>			
Contact Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Email	<input type="text"/>								
Father Occupation	<input type="text"/>							Nationality	Indian	<input type="checkbox"/>	<input type="text"/>						
Caste Category	<input type="checkbox"/>	Gen	<input type="checkbox"/>	OBC	<input type="checkbox"/>	SBC	<input type="checkbox"/>	SC	<input type="checkbox"/>	ST	<input type="checkbox"/>	Other	BPL	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
Aadhar Card Number	<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"/>	<input type="text"/>	Caste Name	<input type="text"/>			
Address	<input type="text"/>																
District/ City	<input type="text"/>							State	<input type="text"/>								

Qualification Details (Enclosure DD/Online Pay Slip, Self Attested Xerox Copy of All Qualification and Extra Certificate With Identity Proof)

Education Details	Max Marks	Min Marks	Obtain Marks	Grade-%	Passing Year	Board/University/Organization
Class 10 th /SSC/Matric	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Class 12 th /HSC/Inter	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Graduate.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Declaration by Application

I hereby declare that I read all the rules and regulations of the institution and I am committed to follow all the rules and regulations with my best of my efforts. If found any violation than the institute authority has the rights to terminate my registration. In case of termination the institute will not responsible for any fee return or any kind of claim. I also declare of my knowledge.

Date	<input type="text"/>
Place	<input type="text"/>

Signature of Applicant

Signature of Guardian

Authority Signature

Undertaking by the Applicant

READ CAREFULLY INSTUCTIONS BEFORE COMPLETING THE REGISTRATION FORM

1. I declare that I have not been debarred from joining any educational institution or rusticated from the Institution/Board last attended.
2. I declare that all the statements made in the application by me are true to the best of my knowledge and belief. Clearly understand that if any of the statements subsequently found untrue, my admission to the Institution would stand automatically cancelled, without any claim for refund.
3. I have read the rules & regulations regarding admission criteria made by the Institution and instructions incorporated there in carefully. I have read and understood the conditions of eligibility for the programme to which I seek admission. I fulfill the minimum eligibility criteria and I have been provided with necessary information in this regard. In the event of any information being incorrect or misleading my candidature shall be liable to cancellation by the AIME at any time and I shall not be entitled to refund of any fee paid by me to the Institute.
4. I have satisfied my self that I fulfill the minimum educational, physical and medical standards and that I agree to be removed from the institution if found deficient in these standards during the course of my stay at the Institute.
5. I agree that admission may be granted to me on the conditions stated in the latest edition of the prospectus/Syllabus prescribed by the AIME or such modification thereof as may be made by the AUTHORITIES.
6. I have read the rules, regulations and code of conduct as prescribed by The AIME and promise to abide by them and those that may be made in future for the admission to the Institute. I also undertake that I shall do nothing inside Institution Campus that will interfere with its discipline.
7. I undertake to pay the due of Institute and other dues regularly if admitted.
8. I also declare that:
 - A. I have never been convicted of any criminal offence, nor have I ever been released on bail in connection with a criminal case.
 - B. No case of criminal offence or moral turpitude is pending against me in any Court of law.
 - C. No complaint of F.I.R. has ever been lodged against me by the School College.
 - D. I have not been debarred from appearing in by Coordination Committee.
 - E. Admission is purely on temporary basis subject to confirmation by the concerned authorities.
9. In case it is found at any stage by the authority that I am not eligible for admission/course, I shall have no Claim for the refund of fees and will not make any legal dispute.
10. I accept that if any above undertaking is missing I agree to be prosecuted by the court of law for providing take acceptance take statement/declaration.

Place	Date	Signature of the Guardian
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Father/ Mother/ Guardian's Undertaking

1. My Son/Daughter/ward (Student Name) is seeking admission with my consent and in the event of his/her being admitted in this Institute. I will be personally responsible for His/her good conduct and behaviour during the education at the Institute.
2. Return of books issued to him/her by the Institute
3. Any other liability related to his/her education at the Institution.

Further, I also agree that he/she shall abide by the rules of discipline of his/her centre as administered by the Authorities of the Institute.

Note: Admission is purely on temporary basis, subject to confirmation by the AIME.

Place	Date	Signature of the Guardian
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Declaration

We _____ (Candidate) _____ (Parent/Guardian) hereby declare that the entries made in this form are true and correct. We have carefully read all terms and conditions, rules and regulations as stipulated in the prospectus and shall abide by the same. We also undertake that we will not discontinue the course in any circumstances before the completion of the course, however, if this happens due to any un-avoidable/unforeseen circumstances, we shall be liable to pay the fees of full course duration remaining to be completed. We also undertake not to claim any refunds of tuition fee or any other funds deposits. We undertake not to indulge into any legal proceeding.

Date:

Place:

Signature of Guardian

Signature of Applicant

For Office use only

Admission granted for the

Amount Received

Amount in Words

Detail of Demand Draft or Cheque

								DD or Cheque No.	Bank Name with Branch Address
D	D	M	M	Y	Y	Y	Y	Amount in Figure	
Amount in Words									

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Admission Coordinator
Principal with Seal

Enclosures (Photocopy)

- Certificate of 10th Class
- Mark sheet of 12th Class
- Residence Proof
- Certificate of Bonafide
- Medical Certificate
- Certificate of Handicapped
- Income Certificate Identity Proof

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Signature of the Applicant

The application filled in by the student, along with requisite fee & copies of certificate must be submitted to respective Institution.