

eSTD: 2016 Afficiation No.:- DGT-6/4/30/2016-TC

K D PRIVATE INDUSTRIAL TRAINING INSTITUTE

Undertaken & Managed By : K.D. Memorial Educational Trust

Vill - Kewai Dih, Po - Dahapar, PS - Noorsarai, Nalanda, Bihar - 803114

| | admemorialtrust@gmail.com/ Contact No. : 9472911343, 9473453648 |
|---|--|
| Form No ADMISSION F | ORM) |
| TRADE FITTER SESSION: | Affix your |
| विद्यार्थियों से अनुरोध है कि फार्म में सभी डाटा को सत्य और सही भरें। क्योंकि इसी फॉर्म | |
| Name :- Father's Name :- Mother's Name :- Date of Birth :- Date of Birth :- Date of Birth :- | nere |
| Cast*: Aadhar Card No.*: | :- |
| Mobile No.*:- Whats | app No.*:- |
| E-mail ID*:- | Parent Mob*.:- |
| Address*:- | |
| | |
| | |
| Qualification Details*:- | |
| Sr. No. Qualification Name of Board / University Passing Y | Year Full Marks Obtained Marks Percentage Remarks |
| 1. Matric | |
| 2. Inter / +2 | |
| 3. BA, B.Sc & B.Com | |
| Other Qualifications :- | |
| Documents Submitted *: Please tick (√) | |
| 1. High School Marks Sheet : | Admission No. : Allotted Class Roll No. : Registration No. : Date of Admission : |
| Date : | Signature of Student: |

Declaration by Student/ Parent/ Guardian

Self/on behalf of my ward hereby declare that:

- 1. The information given by me in the application form and all enclosures are true to the best of my knowledge. However, should it, be found that nay information/ enclosures therein are untrue/ wrong I am/ my ward liable to be disqualified for admission
- 2. If I am/my ward selected for admission I am/my promise to abide by the rules & regulations of the Institute/Board/University and maintain the discipline in the institute and the hostel.
- 3. Initially the admission is provisional and is subject to confirmation from the counseling authority concerned University and State Government.
- 4. It is compulsory for me/my ward to appear for online/offline/direct counseling at any place directed by the counseling authority with in the specified date and time failing which I/my ward's registration will be automatically cancelled without any refund of fee.
- 5. I Understand that if I get my admission/registration cancelled the fee deposited by me is non-refundable. Cancellation of admission/registration is not possible without paying the full fees for the entire course.
- 6. I undertake to abide by the "Student Leaving Midstream" clause of the prospectus and agree to pay fees for the whole course if I leave course in midstream.
- 7. Any dispute is subject to Bihar Sharif Jurisdiction.

 A Institute of Jechnical Education

| Signature of Declarer | |
|-----------------------------|--|
| Name of Declarer | |
| Relationship with Candidate | |

Principal Signature & Seal

| | MAIA | Dr | 5 |
|-----|------|----|---|
| 4.E | NAI | | Į |
| | | | |

Student's Signature

Date :__

Place :

ESTD: 2016

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Website: www.kditi.in & E-mail ID: kdpvtiti2016@gmail.com, kdmemorialtrust@gmail.com/Contact No.: 9472911343, 9473453648

| IDENTITY CARD FORM | | | | | |
|---|-----|-------------|---|--|---|
| TRADE FITTER | | SESSION |) | | |
| Form Fill in CAPITAL LETTER | | | | | Affix your |
| Name : Father's Name : Mother's Name : Date of Birth : | 2-7 | | | | recent passport size photographs here |
| Contact No. :Address : | E | E-mail ID : | | | |

Parent's/Gurdian Signature