



INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, KALYANI

(Autonomous institution under MHRD, Govt. of India
& Department of Information Technology & Electronics, Govt. of West Bengal)
c/o WEBEL IT Park, Opposite of Kalyani Water Treatment Plant,
Near Buddha Park, Dist. Nadia, Kalyani - 741235, West Bengal
Email: office@iitkalyani.ac.in, website-www.iitkalyani.ac.in

13. Academic Records: Provide academic details (attach self-attested copies of mark sheets):

Examination	Name of the School/ College/Institution	Board/Council/University	Year of passing	Marks %/ Division	Subject(s)/ Stream
Class X					
Class XII					
UG					
Any Other					

For Office Use Only

Stream

Executive M.Tech (AI and Data Science)

Verified Original documents: YES/NO

Admission Number:

Date of Admission

Signature of the Faculty/Officer



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Sl.No. (For office use only)

Undertaking from the Applicant for Admission

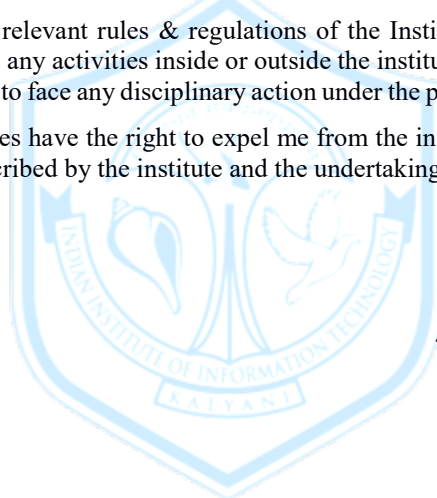
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1. The information furnished by me in this application form and any other form submitted is true to the best of my knowledge and belief. I understand that if any of the statements made by me in connection to my admission is found to be false or incorrect later on at any time, my admission will be cancelled and fees deposited by me shall be forfeited and in such situation I may be expelled from the Institute as may be decided by the Authority.
2. I undertake to pay the institute all admissible dues regularly.
3. In case I fail to make the payment within the stipulated date, I understand that the institute reserves the right to strike off my roll number from the register.
4. After securing admission, in case I discontinue my studies in the institute, I shall not claim any refund except the caution deposit amount (if applicable). In such case, I shall submit my application for refund of caution money within one month from the date of discontinuing the course.
5. I hereby agree to comply with all relevant rules & regulations of the Institute as well as its statutory bodies and undertake that I shall not resort to any activities inside or outside the institute campus detrimental to the interest of the institute, for which I am liable to face any disciplinary action under the provision of relevant rules & regulations.
6. I fully understand that the authorities have the right to expel me from the institute for any infringement of the rules of conduct and discipline as prescribed by the institute and the undertaking given above to this effect.

Place.....

Date

Signature of Student





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One Page Summary of the Candidate

Course Applied for:

Personal Details (Fill in Capital Letters & all fields are mandatory)

1. Applicant's Name.....

2. Father's/Mother's Name.....

3. Address for Communication.....

District.....State.....

Pin:

4. Contact No.

5. Date of Birth(DD/MM/YYYY): 6. Nationality.....

7. Blood Group..... 8. Sex Male Female Others Please tick 9. Category.....

10. Academic Records

Examination	Stream	Name of the School/ Institution	Board/ University	Year of passing	Marks % Division
10th					
12th					
UG					
Any other					

Signature of the Student:

Date

For Office use only

Course Admitted to :

Date of Admission.....

Signature of Admissions In-charge

Stamp size
coloured
photo to be
affixed