INDIAN INSTITUTE OF INFORMATION TECHNOLOGY KALYANI



An Institute of National Importance (Autonomous institution under MoE, Govt. of India)

(Autonomous institution under MoE, Govt. of India)
WEBEL IT Park, Near Buddha Park, Dist. Nadia, Kalyani - 741235, West Bengal
Email: office@iiitkalyani.ac.in, website: www.iiitkalyani.ac.in

M. Tech Admission Form - 2025

Sl. No.					
Course Applied To: M. Tech (VLSI & Embedded Systems)					
Personal Details (Fill in Capital Letters)	Passport-size colored photograph to be affixed				
1. Applicant's Name	be affixed				
2(a). Father's/Guardian's Name					
(b). Mother's Name					
3. Permanent Address:					
District: Pin: Pin:					
Contact No.: Email:					
4. Address for Communication:					
District: Pin:					
Father's/Guardian's Contact No:					
Guardian's Email Id:					
5. Date of Birth: 6. Place of Birth:					
7. Aadhaar No. 8. Sex Male Female 0	Others (Please tick.)				
9. Candidate's Nationality:					
11. Category GEN SC ST OBC PWD EWS Please tick (certificate	to be submitted.)				

4.0		T 4 1
12.	(TAIE	Details:

Registration Id	GATE Score/Rank	Subject Code	Year

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	Subjects/ Stream
Class X					
Class XII					
UG					
Any Others					

For Office Use Only

Stream	M.Tech (VLSI & Embedded Systems)		
Verified Original documents:	YES/NO		
Admission Number			
Date of Admission			
	Signature of the Officer		

	Sl.No.
Und	ertaking from the Applicant for Admission
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 with my admission are found to be false or incorrect later on at any time, my admission will be cancelled and the fees deposited by me shall be forfeited, and in such a situation, I may be expelled from the Institute as may be decided by the Authority.
2.	I undertake to pay the Institute all admissible fees (e.g., tuition fees, examination fees as stated in the brochure) regularly.
3.	After securing admission, in case I discontinue my studies in the institute and for this reason, if the sear consequently falls vacant by the last date of admission, I shall not claim any refund except the caution deposit amount (if applicable).
4.	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 provisions of relevant rules & regulations.
5.	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 the Student
Decl	aration by the Guardian
1.	I have thoroughly checked the above-mentioned rules pertaining to admission of my ward and agree to the same.
2.	The particulars furnished by my ward are true to the best of my knowledge.
3.	I undertake and bind myself to pay prescribed fees, charges or any other dues levied by the authorities from time-to-time within due date on behalf of my ward.
4.	I shall take care that my ward behaves properly and is not involved in any conduct unbecoming of a student of the institute in any way.

Place

Date

Signature of the Parent/Guardian

One Page Summary of the Candidate

		.Tech (VLSI & Embo in Capital Letters & a		•	
	,	-	•	•	Passport-size
1. Applicant's Name:					colored photograph to
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(b). Mother's	Name:				Je arrivea
3. Address for	Communica	tion:			
District:		State:			
Pin:					
4. Contact No.:	:	5. Guardi	an's Cotact No.: .		
6. Date of Bir	th(DD/MM/	YYYY):		7. Nationality:	
8. Blood Grou	ıp:	9.Sex M	Iale Female O	thers Please tick.	10. Category:
11. Academic	c Records				
Examination	Stream	Name of the School/ Institution	Board/ Council/ University	Year of passing	Marks % Division
10th			Oniversity		
12th					
UG					
Any other					
GATE Registra		GATE S		Subject Code:	Year:
Date:				Date:	
For Office use	-	Tech (VLSI & Embe	edded Systems')	
		•	- J 3-2-10)		
Date of Admiss	sion:			Signatur	e of Admission Officer