

UNIVERSITY COLLEGE OF ENGINEERING OSMANIA UNIVERSITY, HYDERABAD - 500 007

APPLICATION FORM FOR M.E./M.TECH. REGULAR ADMISSIONS (2017-2018)

UNDER SPONSORED CATEGORY					
Please tick mark ($$) appropriate boxes					
Department to which Admission is sought:					

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ВМЕ	Civil	CSE	ECE	EE	ME								
Regi	istratio	n		Amo	ount	D.	.D.No. 8	k Date/Ca	ish	Nar	ne of the Banl	k	
Fee	particu	lars:											
Regi	Office U	n No.									filled in by Candi		
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1.	Full nan		e candid	date: M	r./ Ms.			:					
2.	a) F	ather's /	Guard	ian's N	ame (if	f father is not	t alive)	: Mr./ Ms.					
	b) O	ccupation	on of Fa	ather/G	uardia	n		:					
	c) N	lother's	Name					:					
3.	Perman	ent Pos	tal Addı	ress				:					
4.	Address for Correspondence (Note:- Any change in address must be immediately intimated) (a) Mobile No: (b) E-mail I.D					•	:						
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5.	. Date of Birth: (According to S.S.C. or equivalent)							Date	Month		Year		PTO.

6.	Employment details:-
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i) Name & Address of the Employer

ii) Designation & Nature of the Employment

Note: (i) Enclose permission letter to pursue the course, without which the admission will not be made.

(ii) Enclose certificate of a minimum of two years experience as on 31st July, 2017 reckoned from the date of qualifying degree, failing which the application will be rejected.

7. Education Qualifications:

Examination	Board/Univ. &	NAME OF THE INSTITUTION	DIVISION	AGGREGATE	MONTH &	OPTIONAL
	period of	TOWN/CITY & DIST		% OF MARKS	YEAR OF	SUBJECTS/
	study				PASSING	BRANCH OF
						ENGG.
SSC Or Equivalent						
Intermediate or equivalent						
Diploma in Engineering						
B.E/B.Tech/ AMIE/AMIETE						
B.Sc.						
MSc./MCA or equivalent						

DECLARATION

I PROMISE TO ABIDE BY THE RULES, REGULATIONS AND ORDERS OF THE OSMANIA UNIVERSITY.

I declare that the statements I have made in this application are correct and complete. I have not suppressed any information. I fully understand that my admission will stand cancelled in case any information supplied by me is found to be false at any stage. Further, I shall be responsible for payment of fees, and good behavior/conduct during the period of my study at the college.

Place :	
Date :	Signature of the Candidate