ADAMS INTERNATIONAL INSTITUTE



Managed by AIECT, Regd. under Govt. of Odisha Plot No: 585, Satya Nagar, Bhubaneswar-751007

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FORM NO. ROLL NO. REGD. NO.							Paste here your recent passport size photograph													
SESSION :		_																		
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NAME OF APPLICANT		+	+							<u> </u>		<u> </u>	+	<u> </u>						
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FATHER'S NAME		4	<u> </u>							_		_	_	<u> </u>						
FATHER OCCUPATION																				
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Examination	Board / University			ı	Roll No/Regd No					% of Mark			Subject							
High School / Matric Equivalent																				
Inter / +2 Equivalant																				
Bachelor Degree/ Diploma Equivalent																				
Post Graduate Degree/ Equivalent																				
Any Other Exam																				

Working Experience if any

Organization	Designation	From	То	Work done	Remark

LIST OF ENCLOSURES:

- 1. High School / Equivalent Mark Sheet
- 2. Inter / +2 / Equivalent Mark Sheet
- 3. Degree /Diploma / Equivalent Mark sheet
- 4. P.G. Degree / Equivalent mark sheet
- 5. Any other
- 6. Caste Certificate

DECLARATION BY THE APPLICANT

- 1. I hereby declare that all the particulars given in the applications and the enclosures are true to the best of my knowledge. If any of the particulars are found incorrect, my candidate may be cancelled.
- 2. I shall abide by the rules and regulations of the college, and also participate in the extra curriculum activities held in the college. If I get admission by giving misleading or incorrect information, the college may cancel my admission and forefeet the fee etc. deposited by me.
- 3. I understand that college has the right to change the syllabus, course structure, course fees, rules & regulations as and when required.
- 4. I understand that FEES once paid will not be refunded under any circumstances.
- 5. All the disputes regarding any matter will comes under Bhubaneswar Jurisdiction Only.

Place :	Date :	Signature of the Applicar					
TO BE FILLED BY PAREN	T / GUARDIAN						
I/We Mr./Mrs		Parent /Guardian of					
		hereby declare that the true to the best of my knowledge & belief and I/ We / We also agree to abide by the rules of the college in					
Place :	Date :	Signature of the parent /Guardia					
	FOR OFFIC	CE USE ONLY					
Admitted to the Course		Received					
Semester		Cheque / DD No Dt					
Category of Seat		For Rs					
Hostel Allotted		Concession /Scholarship					
Transportation		Any Other					