

ACADEMIC DETAILS

Name of Exam	Reg. No	Name of the Institution & Address	Name of the Board	Month & Year of Passing	Medium of Instruction	% of Marks
SSLC / 10th Std.						
PUC/+2						
DEGREE						

DECLARATION BY THE APPLICANT

I,Son/Daughter/Ward of
 agree to abide by the rules and regulations of Patel Institute of Science & Management, Bangalore and declare that the information provided above is true and correct to the best of my knowledge and belief and in the event of any information being found incorrect or misleading, and hence if the college rejects my eligibility at a later date, then **I understand that, I am liable to forfeit my admission along with all the fee paid.**

I also promise that, I will neither involve myself in any unlawful or provocative or communal or anti-social or political activities, nor cause physical harm to any fellow student or teacher or official. I will not participate in any strike or demonstration and will not induce others to do so. I also agree not to involve myself in the damage to the college property and not indulge in any act that will lower the prestige of the college and self.

I am very well aware that ragging is a criminal offence under UGC Regulations 2009. I will not indulge in any conduct whether by words

Place

Date

.....
Signature of the Applicant

DECLARATION BY THE PARENT

I,Parent/Guardian of
 have read the rules and regulations of the college. My son/daughter/ward has signed the above declaration in my presence. I agree to extend my full co-operation to the college authorities in ensuring that my son/daughter/ward abide by the rules and regulations of the college. I further agree to visit the college as often as possible to acquaint myself about the attendance and progress of my son/daughter/ward. I agree to make all payments to the college as per schedule. I also agree **fees once paid will not be refunded under any circumstances.**

Place

Date

.....
Signature of the Parent/Guardian

FOR OFFICE USE ONLY

Course Allotted

Date of Admission

FEE PAID AT COLLEGE

Receipt No: _____

Date: _____

Amount: _____

Marks Card Verified by

Signature

(NAME IN BLOCK LETTERS)

Admission Incharge

Signature

(NAME IN BLOCK LETTERS)

Approved By

Signature

(DIRECTOR / MANAGEMENT)