

# BIHAR PRIVATE TECHNICAL & PROFESSIONAL INSTITUTIONS ASSOCIATION

REGD. OFF.: C/o. R.P.S. Head Office, East of Canal, Under Fly Over Bridge, Near Appolo Tyres, Bailey Road, P.O. B.V.College, Rukanpura, Patna-800014

CHAIRMAN OFF.: K.K.College of Engineering & Management, At-Berauti, PO-Nepura, PS-Deep Nagar, Biharsharif, Dist-Nalanda-803115.(Bihar)

SECRETARY OFF.: 141/83, Ashok Nagar, Gaya-823001 (Bihar)

EXAMINATION CONTROLLER OFF.: Corp. Off: - 32, Patliputra Colony, Patna- 800013. (Near Pensaner Bhawan) पेन्शनर भवन के पास

Web : www.bihartechassociation.org, Email : biharpvtassociation@gmail.com

Mobile No.- 7260955569

## APPLICATION FOR ADMISSION IN POLYTECHNIC COLLEGE SESSION 2019-20



FORM No. ....

For Office Use Only

Institution Allotted \_\_\_\_\_

Branch Allotted \_\_\_\_\_

### Instructions :

1. Please read Brochure & Instruction before Filling the form.
2. Write in Block Letter only.
3. Enclose photocopies of all Self attested to all certificate related to Qualifications as well as Caste certificates.
4. Put the Number in the Box in Order of Preference.

Affix recent  
Pssport Size  
(35 mm x 45 mm)  
Photo

With Self Signed  
acrosed on Photograph

1. Applicant Name :

2. Father's Name :

3. Mother's Name :

4. Guardian's Name :

(In Case Father is not alive, state relationship)

5. Date of Birth :           Aadhar No.:

### 6. Address for Communication :-

Pin code       Mobile No.

Alternate No. :  E-mail

### 7. Permanent Address

Pin code       Mobile No.

Alternate No. :  E-mail

8. Gender :  M  F Others:-

9. Category : GEN  SC  ST  OBC  PH  OTHERS

10. Educational Qualifications

S.No.	Qualification	Board / University	School/College	Div/Per	Passing year	Subjects
1						
2						
3						
4						

11. Branch Applied for - [Please write 1, 2, 3..... in the boxes in order of your preference]

- (a) Civil Engineering
- (b) Mechanical Engineering
- (c) Electrical Engineering
- (d) Electronics & Communication Engineering
- (e) Computer Science & Engineering
- (f) Electrical & Electronics Engineering
- (g) Automobile Engineering
- (h) Electronic Engineering

12. Declaration of Candidate :

(i) I ..... NAME OF CANDIDATE ..... hereby declare that information's furnished above are correct to the best of my knowledge and belief based on the record. If any information, given by me above, found to be false or incorrect, my candidature is likely to be rejected without assigning any reason thereof and due legal action is to be initiated against me.

(ii) I further declare that if I am admitted to any institution of the Association, I shall abide by all the rules and regulations of the institute.

Place :

Date :

*Full Signature of the Candidate*

13. Declaration by the Father / Guardian :

I ..... NAME OF FATHER / GUARDIAN ..... hereby declare that if my son / daughter..... योग: कर्मसु कौशलम् ..... is admitted to any institution of the Association, I shall be responsible for his/her conduct and undertake to pay all fees and charges of the Institute.

Place :

Date :

*Full Signature of the Father/Guardian*



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## COMBINED ENTRANCE EXAMINATION For Admission in the Diploma Courses 2019-2020

### ADMIT CARD

For Office Use Only

(Office Copy)

1. Roll No. ....
2. Centre .....
3. Exam Date ..... Time .....

#### Particulars to be filled by the candidate

1. Name of the candidate (Block Letters ) : .....
2. Father's Name of the candidate (Block Letters) : .....
3. Mark of Identification .....
4. Full Signature of the Candidate .....

Affix recent  
Pssport Size  
(35 mm x 45 mm)  
Photo

With Self Signed  
acrosed on Photograph

Note : Candidate is to use only ball point pen during examination.

Name & Signature of  
Assistant Convener of College With Seal

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### ADMIT CARD

(Student Copy)

For Office Use Only

1. Roll No. ....
2. Centre .....
3. Exam Date ..... Time .....

#### Particulars to be filled by the candidate

1. Name of the candidate (Block Letters ) : .....
2. Father's Name of the candidate (Block Letters) : .....
3. Mark of Identification .....
4. Full Signature of the Candidate .....

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Name & Signature of  
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