



Agni College of Technology

Estd. in 2001



**Approved by AICTE, New Delhi, Accredited by NBA and
Affiliated to Anna University, Chennai**

Old Mahabalipuram Road, Thalambur, Chennai – 600 130

Phone: (91-44) 6740 9441 to 6740 9498 Fax : 67409499

E-mail : admission@act.edu.in Website : www.act.edu.in

Admin. Off.: 'Agni Business Centre' III Floor, New No.24, Old No.46, K.B. Dasan Road,
Chennai – 600 018 Phone : (91-44) 2433 3414

APPLICATION FORM FOR M.E. COURSES			AFFIX PASSPORT SIZE PHOTO
Course / Branch <input style="width: 300px; height: 20px;" type="text"/>			
Year : 201 - 201	APPLICATION NO. PG	Transport <input style="width: 50px; height: 20px;" type="text"/> Hostel <input style="width: 50px; height: 20px;" type="text"/>	

General particulars (To be filled by the candidate)

1. Name of the Applicant (in block letters)			
2. Sex	Male / Female / Transgender		
3. Address for communication with pin code			
Phone with STD Code	Village / Taluk / District	State	
	Res.:	Office :	Mobile:
4. a) Date of Birth & Age b) Place of Birth c) Identification Marks d) Blood Group e) Aadhar No. (Copy to be attached)			
5. a) Nationality b) Religion c) Community (Tick relevant category) d) Caste	OC / BC / BCM / MBC / SC / SCA / ST		
6. Mother Tongue			
7. Parent Details :			
(i) a) Father Name b) Occupation c) Working Place Address d) Annual Income e) Contact Nos.	Res.:	Off.:	Mobile:
(ii) a) Mother Name b) Occupation c) Working Place Address d) Annual Income e) Contact Nos.	Res.:	Off.:	Mobile:

16. JOINT DECLARATION BY THE APPLICANT AND PARENT / GUARDIAN

The information furnished above is true and correct to the best of my knowledge. The original certificates not attached with this application, will be produced at the time of admission. In case any information found to be incorrect, we will not have any claim for admission. I submit that I will abide by the rules and regulations of the college.

Signature of the Applicant

Station :

Date :

Signature of Parent / Guardian

FOR OFFICE USE ONLY

i. Classification of Candidate	OC / BC / BCM / MBC / SC / ST / SCA		
ii. Stream of examination	Graduate	Post Graduate	
	If others, specify		
iii. University			

ADMISSION STATUS

i. Admission	Confirmed	Not Confirmed
ii. Course	M.E	Course Name

For AGNI COLLEGE OF TECHNOLOGY

Checked by _____

Name _____

Principal

Important Instructions to Candidates

1. Candidate should write his/her Name in block letter as enrolled in Higher Secondary Examinations.
2. Candidate should furnish his/her detailed Correspondence address with pin code. The college will not be responsible for the late or non delivery of any communication due to change of address.
3. The date of birth of the candidate should be as in HSC mark sheet.
4. Candidates belonging to BC/BCM/MBC/SC/ST and SCA should attach photostat copy of the following :
• Income Certificate duly signed by Revenue/Competent Authority. • Community Certificate. • Bank Passbook of Student-front page of pass book with MICR & IFSC details. • Aadhar Card.
5. Candidate should enclose the photo copies of mark sheets and achievements in extracurricular activities (Sports & Games, N.C.C., N.S.S., Scout and Others).
6. Differently abled candidates should enclose photo copy of medical evidence.
7. Passport size photographs – 05 Nos. to be submitted.

Student's Bank details for scholarship purpose

Name of the Account Holder	
Name of the Bank / A/C. No.	
Branch	
Bank IFSC Code	
Bank MICR Code	
Aadhar Card No.	

DETAILS REQUIRED FOR TRANSPORT OR HOSTEL FACILITY

<u>TRANSPORT (YEAR 201 - 201)</u>		BOYS	<input type="checkbox"/>	GIRLS	<input type="checkbox"/>
1. Name of the applicant (in block letters)	:			<input type="text"/>	
2. Address for communication with pin code	:				
3. Parent's Contact No.	:				
4. Point	:	5. Route No.	:		
STAGE I	<input type="checkbox"/>	II	<input type="checkbox"/>		III
<u>HOSTEL (YEAR 201 - 201)</u>		BOYS	<input type="checkbox"/>	GIRLS	<input type="checkbox"/>
1. Name of the applicant (in block letters)	:			<input type="text"/>	
2. Address for communication with pin code	:				
3. Parent's Contact No.	:				
4. Local Guardian No.	:				
5. Room No.	:				
<u>TRANSPORT (YEAR 201 - 201)</u>		BOYS	<input type="checkbox"/>	GIRLS	<input type="checkbox"/>
1. Name of the applicant (in block letters)	:				
2. Address for communication with pin code	:				
3. Parent's Contact No.	:				
4. Point	:	5. Route No.	:		
STAGE I	<input type="checkbox"/>	II	<input type="checkbox"/>	III	<input type="checkbox"/>
<u>HOSTEL (YEAR 201 - 201)</u>		BOYS	<input type="checkbox"/>	GIRLS	<input type="checkbox"/>
1. Name of the applicant (in block letters)	:				
2. Address for communication with pin code	:				
3. Parent's Contact No.	:				
4. Local Guardian No.	:				
5. Room No.	:				