

# JAIN UNIVERSITY

Declared as Deemed-to-be University u/s 3 of the UGC Act,1956

## FACULTY OF ENGINEERING & TECHNOLOGY

Admission No.

For Office Use

Application No.

Recent passport  
size colour photograph

NOTE: Fill up the application form in block letters only

## B.TECH. APPLICATION FORM

Please tick the appropriate programme:

Programmes Offered :

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> Aerospace Engineering *                 | <input type="checkbox"/> Civil Engineering                 | <input type="checkbox"/> Computer Science & Engineering | <input type="checkbox"/> Electrical & Electronics Engineering |
| <input type="checkbox"/> Electronics & Communication Engineering | <input type="checkbox"/> Information Science & Engineering | <input type="checkbox"/> Mechanical Engineering         |   |

### INSTRUCTIONS TO FILL THE APPLICATION FORM

- Each applicant should submit only one form
- Forms must be filled in applicant's own handwriting
- Only applicants who have achieved 60% and above in both 10<sup>th</sup> & 12<sup>th</sup> standard are eligible to apply
- Keep a photocopy of the filled application for future reference. Form number must be quoted in all future correspondence
- Do not send any original documents along with the application form
- Applicants are required to submit photocopies of the 10<sup>th</sup> & 12<sup>th</sup> standard marks cards
- Duly filled in form along with a DD of ₹ 750 /- in favour of "JAIN UNIVERSITY" payable at Bangalore to be sent to following address:

#### Admissions Office

School of Engineering & Technology

Jain Global Campus, Jakkasandra Post, Kanakapura Taluk, Ramanagara District - 562 112

### APPLICANT INFORMATION

NAME OF THE APPLICANT (AS PER 10<sup>TH</sup> STANDARD MARKS CARD)

GENDER (TICK)

MALE

FEMALE

DATE OF BIRTH

DATE

MONTH

YEAR

MOTHER TONGUE

APPLICANT MOBILE NUMBER

MOTHER'S NAME

OCCUPATION

MOBILE NUMBER

FATHER'S NAME

OCCUPATION

MOBILE NUMBER

PARENT'S EMAIL ADDRESS (ANY ONE)

APPLICANT EMAIL ADDRESS

ADDRESS FOR CORRESPONDENCE ( DO NOT REPEAT NAME)

CITY

STATE / PROVINCE / REGION

PINCODE

COUNTRY

## EDUCATIONAL INFORMATION

CLASS	INSTITUTION WITH LOCATION	BOARD OF EXAMINATION	YEAR OF PASSING	PERCENTAGE
10 <sup>TH</sup>				
11 <sup>TH</sup>				
12 <sup>TH</sup>				

## DECLARATION

I hereby, declare that all information furnished above is true to the best of my knowledge. I promise to abide by the decisions taken by the institution's authorities.  
**I understand that the amount once paid by me for admissions will be non-refundable.**

Signature of the Parent / Guardian

Signature of the Applicant

Date:

## REMARKS

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School of Engineering & Technology  
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Jain Global Campus, Jakkasandra Post, Kanakapura Taluk, Ramanagara District - 562 112

P +91 80 2757 7200 E info.set@jainuniversity.ac.in

M +91 97319 05901 / 99454 79356 / 99454 79386 / 99000 94800

[www.set.jainuniversity.ac.in](http://www.set.jainuniversity.ac.in)