9/20/2018 Form Validation



Rashtreeya Sikshana Samithi Trust
R.V.COLLEGE OF ENGINEERING
(Autonomous Institution Affiliated to VTU, Belgaum)
Approved by All India Council for Technical Education, New Delhi

Phone:080-67178020/21 080-67178026/8161 Fax:080-67178011 Website:www.rvce.edu.in

	R.V.Vidyanikethan Post, Mysore		ore Road, Ban	galore-56	50059		Email ID:	mail ID: principal@rvce.edu.in								
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E-Mail Address			Father Mother	Mother												
7. Name and Address of Local Guardian if any (Provide a copy of the address proof)Any change in the postal address to be informed to us with new without fail							ew addres	ss proof								
	Name of local gaurdian			Address of	Address of the Local Guardian											
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9	Seat Claimed Category * GM SC ST I IIIA Allotted Category * GM SC ST IIIIA Personal Details	Mode-1* GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-2 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-1* Mode-2 Mode-3 GENERAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-1* Mode-2 Mode-3 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-4 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-3 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-4 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-3 Mode-4 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-3 Mode-4 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-3 Mode-4 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-3 Mode-4 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE Mode-3 Mode-4 GENERAL RURAL KANNADA MEDIUM HYD KARNATAKA NONE MODE-4 MO						
		Date Of Birth(date/month/year) *Date: 03 v Month: MAR v Year: Age * Mother Tongue KARNATAKA NON KARNATAKA NON KARNATAKA Domicile *: FOREIGN NATIONAL v Gender *FEMALE v Blood Group Student's Email address * Student's Mobile Number Student's Aadhar card no* Nationality *INDIAN Religion* Caste						
10	. B.E	Register No. of qualifying examination*						
	Qualifying Exam Passed *B.Tech Specialization/branch studied in degree* Biotechnology Bio Medical Engineering	Month and Year of Passing* Month MAR -Year						
	Chemical Engineering	Name of the College last attended *						
	Name of the University*	Name of the University* Place *						
11	.Degree Marks and Percentage*	State * Degree Marks Marks Obtained Maximum Marks						
		I-sem						
12	In case of Foreign students (Enclose photo copy of passport and visa)	Nationality						
112	and case of 1 oreign students (Enclose photo copy of passport and visa)	Passport Number Passport Expiry date						
		Visa Number Visa expiry date Embassy Permission letter no Embassy Permission letter date						
		Embassy refinission letter no						
13	Attested Copies enclosed							
	a) PGCET/Management Allotment order	Original & 3 Sets of attested Photo copy * • Yes • No						
	b) Marks card of Degree program	Original & 3 Sets of attested Photo copy * O Yes O No						
	c) Degree Certificate / PDC d) GATE Score card	Original & 3 Sets of attested Photo copy* • Yes • No						
	e) Transfer Certificate	Original & 3 Sets of attested Photo copy* Yes No Original & 3 Sets of attested Photo copy Yes No						
	f) Migration Certificate	Original & 3 Sets of attested Photo copy * • Yes • No • Not Applicable						
	g) Eligibility Certificate issued by VTU	Original & 3 Sets of attested Photo copy * • Yes • No • Not Applicable						
	h) Caste Certificate	Original & 3 Sets of attested Photo copy * O Yes O No O Not Applicable						
	i) Income Certificate	Original & 3 Sets of attested Photo copy * O Yes No Not Applicable						
	j) NCC/Sports Certificate	Original & 3 Sets of attested Photo copy * • Yes • No • Not Applicable						
	k) Hydrabad Karnataka Certificate	Original & 3 Sets of attested Photo copy * • Yes • No • Not Applicable						
L	l) Passport size photographs (03 Nos)	* • Yes • No						
14	Interest in Extra Curricular Activities if any(Sports, Cultural & Other Activities) Has any of your family member/s studied/studying in RVCE? If Yes,							
13	Provide details. Name of the person: 1	* • Yes • No Name of the person: 2						

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Relation	Relation						
Batch Program	Batch Program						
Contact Details: Mobile Number	Contact Details: Mobile Number						
E-mail ID	E-mail ID						
Present working details: Designation/ USN (If studying currently)	Present working details: Designation/ USN (If studying currently)						
Name of the organization	Name of the organization						
Address of the organization	Present working details: Designation/ USN (If studying currently)						
Name of the organization	Name of the organization						
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Previous Employment, if any	Designation:						
he information furnished is true to the best of my knowledge and if for	und false, appropriate action may be initiated against us us as deemed fit. I Agree						
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