Regn. No.	

(For office use only)

# NATIONAL INSTITUTE OF TECHNOLOGY SILCHAR

(An Institute of National Importance under MHRD, Government of India)

#### APPLICATION FOR ADMISSION INTO MBA PROGRAMME **FOR THE YEAR 2019-21**

TO BE FILLED IN BY THE CANDIDATE										Recent Passport Size																
Ex	am	Date of	H.T. No./ Reg No.	Perce	entile			DD Amount: Rs1500 (GEN/OBC) /1000 (SC/ST/EWS)								Pho	otogi	aph								
CA	ΛT	Exam					D	D N	0.:				Date	<b>:</b>												
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M	AΤ							vour ank c								paya	bie	at S	tate				(Sell	Au	Sicc	1)
The application form duly filled up and signed by the applicant along with self-attested copies of the pass certificates /mark sheet of all examinations passed including CAT/CMAT/MAT score card and other necessary documents applicable, should be sent to the office of <b>The Head</b> , <b>Department of Management Studies</b> , <b>NIT Silchar</b> , <b>Assam</b> , <b>Pin-788010</b> , on <b>or before 30.03.2019</b> . Incomplete Application Form and Forms received after the due date will be summarily rejected. The Institute will not be responsible for any postal delay.  1. Name of the Applicant (in Block Letters)																										
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2.	Moth	ner's Na	me( in B	lock Le	tters)																					
3.	Fathe	er's Nar	ne ( in Bl	ock Le	tters)																			<u> </u>		
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4.	Date	of birth	( as per	10 <sup>th</sup> Cla	ass / S	.S.C.	Certi	ficat	e)																	
5.	Gene	der				Male	e						Fer	nale								Othe	rs			
6.	Add	ress																								
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9.	Cont	tact No	.: Prima	ry :								A	Alter	nati	ve:											

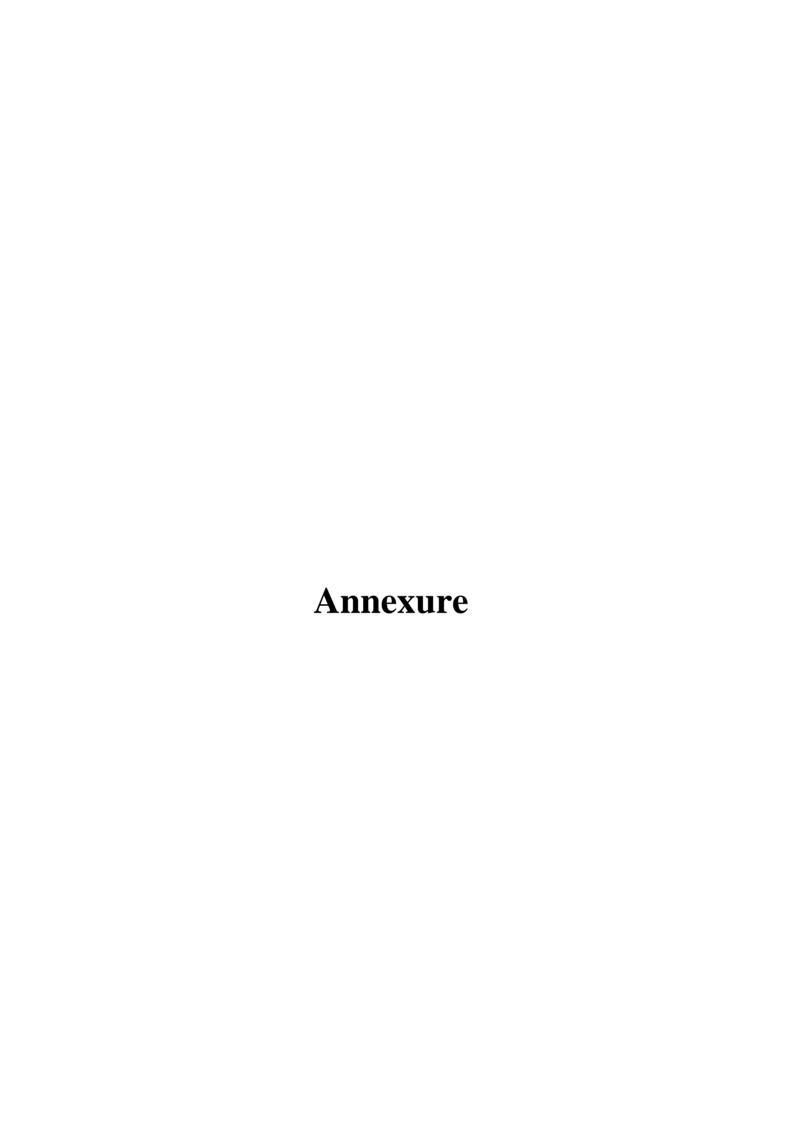
10. Category ( Tick at the appropriate box)

(In case of SC/ST/PWD enclose latest community certificate). In case of OBC-NCL, the certificate issued on or after 01-01-2019 based on the income of 2017-18 financial year is only acceptable.

OP	EW	VS C	OBC-NCL (mention the case	ste)	SC	ST	PWD

11.	Nationali	ty		12 Ma	rital Status:		
13.	Guardian	's name (in block	k letters ) ar	nd address (if b	oth parents are 1	not alive)	
						Control No	
14.		on of Father/ Gu				Contact No	
15.	Details o	f Qualifying Exa	nmination P	assed			
	Exa Pass			Name of the Institute	Year of Passing	Subject Studied	Percentage / CGPA
						, enclose necessary proof	)
	Nam	e of Employer	From	То	Duration ( in month	0	Salary Draw
18.	Details of	f enclosures (self	-attested ce	rtificates /docu	ments) submitte	ed with Application Form :	<u> </u>
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	m			n			
			DECLA	ARATION OF	THE CANDII	DATE	
app stag	olication fo ge that any	rm and also the	enclosures rnished the	thereto submitt rein is untrue	ted by me are tr	and the information fur rue. Should it, however, be ticulars; I realise that I an	e found at any
Pla	ce.						
	te:					Signature of th	o Candidate
101						อเยนนนาย () เหเ	. valuuluule

FOR OFFICE USE



# **OBC Undertaking**

# Declaration / undertaking - for OBC Candidates only

I,	son/daughter of Shri	resident of village/town/city	district
	State hereby declare that I belong to the	community which is recognise	d as a backward
class by the	Government of India for the purpose of reservati	ion in services as per orders contained i	n Department of
Personnel and	d Training Office Memorandum No.36012/22/93	- Estt. (SCT), dated 8/9/1993. It is also d	leclared that I do
not belong to	persons/sections (Creamy Layer) mentioned in	Column 3 of the Schedule to the above	e referred Office
Memorandun	n, dated 8/9/1993, which is modified vide Depa	urtment of Personnel and Training Office	e Memorandum
No.36033/3/2	2004 Estt.(Res.) dated 9/3/2004.I also declare tha	at the condition of status/annual income	for creamy layer
of my parents	s/guardian is within prescribed limits as on financ	ial year ending on March 31, 2019.	
Place:		Signature of the Candidate	
Date:		G	

Declaration/undertaking not signed by Candidate will be rejected

#### Annexure I

#### **OBC Certificate Format**

# FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTES, UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./Kum.	
of Village/Town	District/Division in the
State belongs to the	Community which is recognized as a backward class under:
(i) Resolution No. 12011/68/93-BCC(C) da 13/09/93.	ated 10/09/93 published in the Gazette of India Extraordinary Part I Section I No. 186 dated
(ii) Resolution No. 12011/9/94-BCC dated 20/10/94.	19/10/94 published in the Gazette of India Extraordinary Part I Section I No. 163 dated
	24/05/95 published in the Gazette of India Extraordinary Part I Section I No. 88 dated
(iv) Resolution No. 12011/96/94-BCC dated (v) Resolution No. 12011/44/96-BCC dated 11/12/96.	19/03/96. d 6/12/96 published in the Gazette of India Extraordinary Part I Section I No. 210 dated
(vi) Resolution No. 12011/13/97-BCC dated (vii) Resolution No. 12011/99/94-BCC dated	
(viii) Resolution No. 12011/68/98-BCC date	ed 27/10/99.
(ix) Resolution No. 12011/88/98-BCC date 06/12/99.	d 6/12/99 published in the Gazette of India Extraordinary Part I Section I No. 270 dated
(x) Resolution No. 12011/36/99-BCC dated 04/04/2000.	d 04/04/2000 published in the Gazette of India Extraordinary Part I Section I No. 71 dated
(xi) Resolution No. 12011/44/99-BCC date 21/09/2000.	d 21/09/2000 published in the Gazette of India Extraordinary Part I Section I No. 210 date
(xii) Resolution No. 12016/9/2000-BCC date	ed 06/09/2001.
(xiii) Resolution No. 12011/1/2001-BCC dat	ted 19/06/2003.
(xiv) Resolution No. 12011/4/2002-BCC dat	ted 13/01/2004.
(xv) Resolution No. 12011/9/2004-BCC dat 16/01/2006.	ed 16/01/2006 published in the Gazette of India Extraordinary Part I Section I No. 210 dated
	dated 12/03/2007 published in the Gazette of India Extraordinary Part   Section   No. 67
(xvii) Resolution No. 12015/2/2007-BCC da (xviii) Resolution No. 12015/13/2010-BCC da (xviii) Resolution Resol	
State. This is also to certify th	and/or his family ordinarily reside(s) in the District/Division of at he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of Department of Personnel & Training O.M. No. 36012/22/93 Estt.(SCT) dated 08/09/93 which(Res.) dated 09/03/2004.
Dated:	District Magistrate/ Deputy Commissioner/Competent Authority.
Seal	

#### NOTE:

- (a) The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- (b)The authorities competent to issue Caste Certificates are indicated below:
- (i)District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / First Class Stipendiary Magistrate / Sub-Divisional magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1st Class Stipendiary Magistrate).
- (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
- (iii) Revenue Officer not below the rank of Tehsildar and
- (iv) Sub-Divisional Officer of the area where the candidate and / or his family resides.

#### Annexure - II

# **SC/ST Certificate Format**

#### FORM OF CERTIFICATE TO BE PRODUCED BY A CANDIDATE BELONGING TO SCHEDULED CASTE OR SCHEDULED TRIBE

This is to certify that Shri/S	mt./Kum	Son/Daughter of Shri	
TD •4	of village/Town	in District/ Division	of the State/Union
Caste/Scheduled Tribe und	belongs to the	caste/Tribe, which	is recognized as a Schedule
Caste/Scheduled 1710e und	er.		
The Constitution (Scheduled			
The Constitution (Scheduled			
	Castes)(Union Territory ) order, 1951.		
· · · · · · · · · · · · · · · · · · ·	Tribes) (Union Territory ) order, 1951.		
Reorganization Act, 1966, T Castes and Scheduled Tribes	alled Castes and Scheduled Tribes (Modificat The State of Himachal Pradesh Act, 1970, the orders (Amendment) Act, 1976.) ashmir) Scheduled Caste Order, 1956;		
*The Constitution (Andaman ar (Amendment) Act. 1976;	nd Nicobar Islands) Scheduled Tribes, 1959, a	as amended by the Scheduled Castes	and Scheduled Tribes orders
*The Constitution (Dadra and N	Vagar Haveli) Scheduled Castes Order 1962;		
	gar Haveli) Scheduled Tribes Order, 1962;		
	) Scheduled Castes Order, 1964;		
	h) Scheduled Tribes Order, 1967;		
	&Diu) Scheduled Castes Order, 1968;		
	&Diu) Scheduled Tribes Order, 1968;		
*The Constitution (Nagaland) S *The Constitution (Sikkim) Sch			
*The Constitution (Sikkim) Sch			
	Castes) Orders (Amendment) Act, 1990.		
`	ribes) Order, (Amendment) Ordinance, 1991.		
	ribes) Order, (Second Amendment) Act, 1991.		
*The Constitution (Scheduled			
	Castes) Orders (Amendment) Act, 2002.		
	Castes) Orders (Second Amendment) Act, 2	2002	
	cheduled Tribes Orders (Amendment) Act, 2		
Applicable in the case of Sche	duled Castes/Scheduled Tribes persons who	have migrated from one State/Unio	on Territory Administration.
	the basis of the Scheduled Castes/Scheduled		
	Father/Mother	of Shri/Smt	O
village/town	in Distric	t/Division	of the
State/UTwh	no belongs to the	caste/Tribe which is recognized	as a SC/ST in the State/Union
Territory	issued by the	(name of t	he prescribed issuing authority)
	and or his/her family ordinarily reside(s	s) in Village/Town	of
District/Division of the Stat	e/Union Territory of		
Place		Signatura	
1 1400		Signature	
Date		Designation	·
Date			eal of Office)
		( with s	ear or Office)

NOTE: - The terms ordinarily reside(s) used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950

#### LIST OF AUTHORITIES EMPOWERED TO ISSUE CASTE/TRIBE CERTIFICATE:

- 1. District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner /Additional Deputy Commissioner/Dy. Collector/1st Class Stipendiary Magistrate/Sub Divisional Magistrate/Extra Assistant Commissioner/Taluka Magistrate/Executive Magistrate.
- 2. Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- 3. Revenue Officers not below the rank of Tahsildar.
- 4. Sub-Divisional Officers of the area where the candidate and/or his family normally resides.
- 5. Certificates issued by Gazetted Officers of the Central or of a State Government countersigned by the District Magistrate concerned.

#### Annexure - III

#### INCOME AND ASSET CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Cer	tificate No:			<b>Date:</b>		
		Valid for the Year				
This is	to certify that S	Shri/Smt./Kumari			Son/Daughter	of
Shri			primary resident	of		,
village/To	wn	_ Post Office		District	in	the
State/Unio	on Territory	Pin	Code	whose photog	graph is attested b	elow
	Economically Weaker Sect					
(Rupees E	Eight Lakhs only) for the fina	ancial year	His/Her family does r	ot own or possess	s any of the follo	wing
assets***	:					
i)	5 Acres of agricultural la	and ahove:				
ii)	Residential flat of 1000					
iii)	Residential plot of 100 s	•	otified municipilaties:			
iv)	Residential plot of 200 s	• •		ied municipilaties.		
,	•			1		
2.	Shri/Smt./Kumari		helongs to the		caste whi	ch is
	cognized as a Scheduled Cast				custo will	<b>CII</b> 15
	8	,				
		1				
	Recent Passport size		Cianatura	with office soal		
	photograph of the			vith office seal_		
	applicant		Name			
			Decignation	2		
			Designation	າ		
		J				

### Note4: The authorities competent to issue this Certificates are indicated below:

- i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / First Class Stipendiary Magistrate / Sub-Divisional magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1st Class Stipendiary Magistrate).
- ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
- iii) Revenue Officer not below the rank of Tehsildar and
- iv) Sub-Divisional Officer of the area where the candidate and/or his family resides.

<sup>\*</sup>Note 1: Income covered all sources i.e., salary, agriculture, business, profession, etc.

<sup>\*\*</sup>Note 2: The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years.

<sup>\*\*\*</sup>Note3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding to determine EWS status.

#### Annexure - IV

# **PwD** Certificate Format

Format for Physically Challenged (PH)/Persons with Disabilities (PwD) Certificate (To be obtained by the candidate) (To be filled by Medical Board notified under PwD Act)

Certificate No:		Affix here recent Photograph showing the disability duly attested by
Date:		Medical Superintendent /CMO/Head of Hospital (with seal)
This is to certify that Mr./Ms male/female, Registration No.	son / daughter of Mr./M is a case of	rsAge He/ She is physically
disabled/visual disabled/speech and	hearing disabled/having mental retardant) permanent (physical impairment/vis	ntion/leprosy cured and has
	·	
Note: This condition is progressive/not prog	ressive/likely to improve/not likely to imp	prove*.
1. Re-assessment is not recommend out whichever is not applicable)	ded/ is recommended after a period of	months /years*. (*Strike
Signature of Dr.	Signature of Dr.	Signature of Dr.
Name of Dr.	Name of Dr.	Name of Dr.
Specialization	Specialization	Specialization
Seal with Degree	Seal with Degree	Seal with Degree
(Member, Medical Board)	(Member, Medical Board)	(Member, Medical Board)
Signature/Thumb Impression of P	atient	
		Countersigned by the Medical Superintendent/CMO/Head of Hospital (with seal)

#### Information/Guidelines:

- 1) Disability certificate shall be issued by Medical Board of at least three doctors duly constituted by the State or Central government under PWD Act.(One of the members of the Board should be the specialist in the particular field for assessing Locomotor, Visual disability ,Hearing and Speech disability ,Mental disorder and Leprosy cured)
- 2) For candidature under physically challenged category, a candidate only with a minimum of 40% disability is required.
- 3) The Medical Board will assess the Physically Challenged (PH) certificate. In case there is serious doubt about percentage of disability/genuineness of the certificate, the candidate will be referred for reassessment to the Medical Board duly constituted by the State or Central Government under PWD Act.

# ANNEXURE- V

# (Undertaking to be produced by the candidates at the time of admission whose results are awaited)

I, Sri/Ms	, Roll No	Son / daughter of
	here by und	lertake that, I am a bonafied student
of	(Name of Institute/ Colle	ge/ University) and have completed
the final examination including practicals/sec	ctionals and all other requirements	to be eligible for the award of the
degree of in	(bran	nch / Specialization /Pass / Honors)
and my result has not been published yet. My	Percentage or CGPA till the last (sen	nester) examination appeared is
I will produce the result and cer	tificates showing minimum academic	e eligibility criteria as prescribed by
NIT Silchar on or before September 15th, 2	019, failing which my admission sha	all stand cancelled and all fees paid
will be forfeited. I will not appeal to the Institu	ate authority for further extension of	date for submission of my result.
Date:	Sign	nature of the candidate
Place:	Sigi	lature of the candidate
Certification	n by the Institute/ College/ University	ity
		D II M
This Is to certify that Sri/Msbonafied student of this institute/ college	/ University and has completed	the final examination including
practicals/sessionals and all other requ	irements to be eligible for	the award of the degree of
in	(branch / Special xamination appeared is	Alisation / Pass / Honors). His / Her . The result of the said examination
will be published on or before <b>September 15t</b>		
Detail		
Date:		
Place:		
	Signature	with Seal of the Principal/Registrar