

Ref: NITS/Acad./B.Tech. New Admission/2023/184

Date: 3<sup>rd</sup> August.2023

# **NOTICE**

## ADMISSION INSTRUCTIONS FOR FIRST SEMESTER 2023-24 (B.TECH. PROGRAM)

 The Candidates who confirmed their seats for admission in the B.Tech. Program at NIT Sikkim through JoSAA 2023 and/ or CSAB 2023 special round may follow the instructions given below to complete Admission. Such candidates have to physically report at NIT Sikkim, Ravangla Campus <u>between 14<sup>th</sup> to 21<sup>st</sup> August 2023 (9: 00</u> <u>AM to 5:00 PM</u>) along with one set of photocopies of the following documents and

### declarations/certificates (Format- I to VIII);

- i. JEE (Main) Score Card
- ii. JEE (Main) Admit Card
- iii. Birth certificate issued by the competent authority/ Class X (High School) Board Certificate as proof of date of birth
- iv. Self Attested copy of 10<sup>th</sup> Standard/Matriculation Mark Sheet & Certificate
- v. Self Attested copies of Mark Sheet & Pass Certificate of qualifying examination (Class XII) or equivalent
- vi. Original School Leaving Certificate/ Transfer certificate from the school/institute last attended.
- vii. Original Migration Certificate for the last examination board
- viii. Original Character/ Conduct Certificate from the institution last attended.
- ix. Original Gap certificate in Non-Judicial stamp paper (applicable for the candidate who has passed the qualifying exam in years prior to the current academic year) {Format-I}
- x. Medical Certificate [as per JoSAA/CSAB format] {Format-II}
- xi. Certificate of category (SC/ST/OBC-NCL), if applicable, as per Government of India format, available on the JoSAA/CSAB-2023 website, issued by the competent authority. In case of OBC-NCL category, the certificate must be issued on or after April 01,2023. {Format-III or IV}
- **xii.** Certificate for Persons with Disabilities (PwD), if applicable, issued by the competent authority. Refer JoSAA/CSAB-2023 website for format. **{Format- V}**
- xiii. Three Recent Passport size photographs not older than SIX months. (Preferably in formal dress and light colour background) and a soft copy of passport photograph.
- xiv. Provisional Seat Allotment letter
- xv. Photo ID proof of Student, Father and Mother (preferably Aadhar card/ Voter card) issued by the competent authority under Govt. of India

- xvi. Document Verification-cum-Seat Acceptance Letter.
- xvii. Online payment receipt for remaining Institute & Hostel Fee, Bus Fee (only for boys) and Mess fee
- xviii. Anti Ragging Undertaking of Students and Parents: Online form available at <u>https://www.antiragging.in</u>. Students and Parents are required to fill in the Anti ragging undertaking through <u>https://www.antiragging.in/affidavit affiliated form.php</u>. After filling in this form successfully, you will receive the Student's Anti Ragging Undertaking and the Parents Anti Ragging Undertaking in your Email. The copy of the same must be submitted during the physical reporting at Institute.
- xix. Family Annual Income Proof as listed below and Notarized Joint Income Affidavit (In the prescribed format), to claim the tuition fee remission for OBC/General candidates. (Candidates belong to SC/ST & PwD need not to submit the documents related to tuition fee waiver/remission),: {Format-VI}

Annual income proof of Father & Mother is Mandatory as per their occupation along with copy of Aadhar Card of both. The annual income proof includes:

- Last three-month Salary slip, in-case of Father, Mother or both are Government/ PSU/Private sector employee duly signed by DDO of the organization and Form 16 of previous year <u>OR</u>
- Parental full ITR for the assessment year 2023-2024 generated from the Income tax website OR
- Latest Income certificate (issued after 1<sup>st</sup> April 2023) in the name of father and mother by the recognized authority of the respective state.

<u>Note:</u> The separate income proof of Father and Mother need to be submitted based on their respective occupation/sources of income as per the above criteria. In case, father/mother are earning from more than one state of Indian Union, then students have to produce the separate Income proof from concerned state for availing the tuition fee remission. The income proof/ certificate must mention that the "Annual Income is from all the sources"

- xx. Declaration for the late submission of Relevant Documents {Format-VII}
- xxi. Affidavit by the candidate {Format-VIII}

Note: If the original certificates are not in English/Hindi, the English/Hindi version/ translation of such certificates, duly certified by the Principal/Director of the passing Institute, will be required during the verification of documents.

The certificates listed at <u>S.No.vi, vii, and viii</u>, if not available at the time of physical reporting at the Institute, then they have to submit the same on or before  $30^{th}$  September, 2023.

Total amount of Institute fee and hostel fee for 1<sup>st</sup> semester 2023-24 is <u>Rs.98,057/-</u> (Rupees Ninety Eight Thousand and Fifty Seven only) for General and OBC Candidates and <u>Rs.</u> <u>35,557/-</u>(Rupees Thirty Five Thousand Five Hundred and Fifty Seven only) respectively for SC/ST & PwD candidates.

The remaining amount after the payment of Seat Acceptance Fee and Partial Admission Fee in JoSAA and CSAB portal have to be paid to Institute before physical reporting at the Institute.

### 3. Regarding Hostel Accommodation:

- All the students will be provided hostel accommodation. Only local students who are permanent residence of Ravangla Block may be permitted as Day Scholar subject to application by parent and approved by the competent authority of NIT Sikkim.
- Accommodation will be provided on sharing basis depending on the size of the rooms.

### 4. Mess Charges & Bus Facility:

**Boys & Girls Mess**: The Boys & Girls mess are run by a mess contractor authorized by the Institute. Resident students must have to avail the food at the Institute run mess. The mess fee per semester is Rs. 18,000/- (Rupees Eighteen Thousand approximately)

**Institute Bus**: The Boy Hostels are located at Ravangla bazar which is 2 KM away from the campus. To avail the bus facility an amount of **Rs. 1660/- per semester** shall be charged separately. The Bus card will be issued to the students in the later stage.

5. Fee structure for Academic year 2023-24: All the students are requested to visit the Institute website www.nitsikkim.ac.in > Admission> Fee Structure > B.Tech. fee structure for 2023-24 session to understand the pattern of semester wise fee structure

Summary of Fee for 1<sup>st</sup> semester:

Fee category	Institute fee ( A)	One Time Admission Fee (B)	Hostel Fee 1 <sup>st</sup> Semester ( C)	Total (A+B+C)
SC/ST/PWD	8,043.00	10,764.00	16,750.00	35,557.00
OBC-NCL/Gen (whose Annual Family Income is <1 Lakh per year as per the Income proof and Affidavit declaration and accepted by the Institute)	8,043.00	10,764.00	16,750.00	35,557.00
OBC-NCL/Gen (whose Annual Family Income is between 1Lakh to 5 lakh per year as per the Income proof and Affidavit declaration and accepted by the Institute)	28,877.00	10,764.00	16,750.00	56,391.00
<b>OBC-NCL/Gen</b> (whose Annual Family Income is above 5 Lakh or do not wish to claim the tuition fee remission)	70,543.00	10,764.00	16,750.00	98,057.00

#### 6. Bank Account Details for Remaining Fee Payment:

Types of Fee	Total Institute and hostel fee (1 <sup>st</sup> sem)	Seat Acceptance Fee & Partial Admission Fee paid to JOSAA/CSAB 2023	Balance amount to be paid at NIT Sikkim after deduction of <u>Rs.</u> <u>3000 as processing</u> <u>charges of JOSAA</u> (Institute Fee & Hostel fee)during Physical Reporting	Mode of payment &         account details for         payment of remaining         Institute fee         Online Transfer:         SBI payment gateway link is available in         the       institute
Institute & Hostel Fee SC/ST/PwD	35, 557/-	20,000/- & 12,000/- (Rs. 32000/-)	3557/-	(www.nitsikkim.ac.in >Admission >Fee Structure > Online Payment Gateway for INSTITUTE & HOSTEL
OBC-NCL/Gen (whose Family Annual Income is <1Lakh per year as per the Income proof and Affidavit declaration and accepted by the Institute)	35, 557/-	40,000/-& 32,000/- (Rs. 72000/-)	Nil* (the balance amount will be adjusted in next semester)	Account type: Current Account No: 35907648590
<b>OBC-NCL/Gen</b> (whose Family Annual Income is <b>between 1Lakh to 5 lakh per year</b> as per the Income proof and Affidavit declaration and accepted by the Institute)	56, 391/-	40,000/-& 32,000/- (Rs. 72000/-)	Nil*(the balance amount will be adjusted in next semester)	IFSC: SBIN0007218 Bank: SBI Branch: Ravangla (Online transfer/ NEFT/ RTGS etc. are only accepted) OR SCAN & PAY
<b>OBC-NCL/Gen</b> (whose Family Annual Income is > 5 Lakh per year as per the Income proof)	98, 057/-	40,000/-& 32,000/- (Rs. 72000/-)	26,057/-	
<b>Charges of Bus (Optional)</b> The boys hostel is 2 km away from the campus hence all boys students staying in hostel have to pay the bus charges		1660/-	1	

Other fees: 1. Mess food charges Rs. 18,000/- per semester

2. Bus facility is optional and user charges is Rs.1660/-per semester

**Note:** \*For claiming the tuition fee remission at the time of physical reporting and admission, <u>the candidate</u> belong from General & OBC must produce the documents mention at S.No. xix above. The documents related to tuition fee remission must be complete in all respect. The Institute official will verify the genuineness of Income proof and also sent to third party for detail verification; If found wrong/tampered/false at any stage, the admission of the student shall be rejected.

If, a student is unable to produce the proper tuition fee remission documents at the time of physical reporting, she/he has <u>to deposit the full fee</u>. Such students may claim the tuition fee remission later (on or before 30<sup>th</sup> September 2023) by submitting the relevant documents.

7. The hostellers have to pay the **Mess food charges of Rs. 18,000/- approximately for availing the mess facilities.** The hostel and mess facility will start from 14<sup>th</sup> August 2023; Students are allowed to stay in the hostel immediately after the reporting.

The Students are advised to pay the mess fee through online mode, preferably using SBI payment gateway and the link is available in the institute website. (www.nitsikkim.ac.in >Admission >Fee Structure > Online payment gateway for Mess Fee) Or

Can digitally transfer at THE CHIEF WARDEN NIT SIKKIM account of the Institute as given below:

Name: The Chief Warden NIT Sikkim Account No: 31337552052 Account type: Current a/c IFSC: SBIN0007218 Bank: State Bank of India Branch: Ravangla

<u>OR</u> pay by Scan



8. The first semester Classes/Induction program will commence from <u>21<sup>st</sup> August 2023</u>. The detailed Academic Calendar, time table, etc. will be sent to students through e-mail or published in the Institute Website.

For any kind of queries related to admission, you may contact: b.techadmission@nitsikkim.ac.in

ContactNo:7479013257/7479013219/9734122366 (9 AM to 5 PM)

With the permission of the competent authority, issued by:

sSd/-

**Dean Academic** 

# FORMAT-I: STUDY GAP AFFIDAVIT

Mr						ınder:		R/o
1.	That his/ł	ner above name	and address	s correct.				
2.	That his	/her name is				And his/her co	prrect date of	birth is
3.	That he/s	he has passed	12 <sup>th</sup> class fro	m	Board in t	the year	In PCM	1 Science
	stream.							
4.	That the	e is a gap of	<u>1</u> or <u>2</u> year	between pas	ssing of 12 <sup>th</sup>	class and now s	seeking admission	on in the
	NATION	AL INSTITUT	TE OF TEC	HNOLOGY	SIKKIM.			
5.	That	during	this	gap	period,	he/she	was	doing

5.	Inat	during	this	gap	period,	ne/sne	was	doing
	•••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • •	••••••	•••••	• • • • • • • • • • • • • • • • • • • •	•••••
	•••••					•••••		

- 6. That during this gap period, he/she was neither studying anywhere nor passed any other examination.
- 7. That he/she was not involved in any criminal offence whatsoever and not punished for any offence by any Court of law during this gap period.

### **VERFICATION:**

That the above statement is true to the best of my Knowledge and belief and nothing has been concealed there from.

#### DEPONENT

Note: This sample gap affidavit performa. The applicant has to produce documents to proof above requirement to the Notary Public and get signed from him. This gap affidavit is to be print on the legal non-judicial stamp paper of Rs. 10 or above.

### FORMAT- II: MEDICAL CERTIFICATE

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### MEDICAL CERTIFICATE

#### (to be issued by a Registered Medical Practitioner)

### **GENERAL EXPECTATIONS**

Candidates should have good general physique. In particular,

- 1. Chest measurement should not be less than 70 cm, with satisfactory limits of expansion and contraction.
- 2. Vision should be normal. In case of defective vision, it should be corrected to 6/9 in both eyes or 6/6 in the better eye. Colour blind and uni-ocular (having vision in only one eye) persons are restricted from admission to certain courses.
- 3. Hearing should be normal. Defective hearing should be corrected.
- 4. Heart and lungs should not have any abnormality and there should be no history of mental illness and epileptic fits.

1.	(a) Name of the candidate:					(b)	Gender:
2.	Identification Mark (a mole, scar	or birthmar	k), if any				
		<u> </u>					
3.	Major illness/operation, if any (sp	ecity nature	e of illness/o	peration)			
4.	Height in cm:	Weight in	n kg:	Blood	d Group:		
5.	Past History	(a) Menta					
		(b) Epile	ptic Fit				
6.	Chest (a) Inspiration in cm		(b) Exp	iration in cm			
7.	Hearing						
	(Vision with or (Right H	Eye) (Le	eft Eye)	(Colour	Uniocul		vision
8.	without glasses:)			Blindness)	(having	visi	on in
					only one	e eye)	
9.	Respiratory System						
10.	Nervous System						
11.	Heart (a) Sounds		Iurmur				
12.	Abdomen	Hernia				Hydı	rocele
	(a) Liver						
	(b) Spleen						
13.	Any other defects:						
			of Medical				
	$\Box$ The candidate fulfils the prescr				ness and i	is FIT	for admission
	to Engineering/Architecture/ P						
	The candidate does not fulfil the prescribed standard of physical fitness/medical fitness and is unfit/temporarily unfit for admission due to following defects:						
	Doctor's Name Signatur	<u>е</u>	Date	Registration	No.		Seal

### FORMAT III: SC/ST Certificate Format

### FORM OF CERTIFICATE TO BE PRODUCED BY SCHEDULED CASTES (SC) AND SCHEDULED TRIBES (ST) CANDIDATES

1. This is to certify that Shri/ Shi	This is to certify that Shri/ Shrimati/ Kumari*		son/daughter* of			
	of Village/Town*					
	of State/Union Territory*		belongs to the			
	_Scheduled Caste / Scheduled Tribe* under :-					
<ul> <li>* The Constitution (Scheduled Castes) Order, 1</li> <li>* The Constitution (Scheduled Tribes) Order, 1</li> <li>* The Constitution (Scheduled Castes) (Union</li> <li>* The Constitution (Scheduled Tribes) (Union 7</li> </ul>	950 n Territories) Order, 1951					
	led Tribes Lists (Modification Order) 1956, the Bombay H reas (Reorganisation) Act, 1971, the Scheduled Castes and 2002]					
<ul> <li>* The Constitution (Jammu and Kashmir)</li> <li>* The Constitution (Andaman and Nicobar Act, 1976;</li> <li>* The Constitution (Dadara and Nagar Hav</li> <li>* The Constitution (Dadara and Nagar Hav</li> <li>* The Constitution (Pondicherry) Schedule</li> <li>* The Constitution (Qoa, Daman and Diu)</li> <li>* The Constitution (Goa, Daman and Diu)</li> <li>* The Constitution (Goa, Daman and Diu)</li> <li>* The Constitution (Sikkim) Scheduled Ca</li> <li>* The Constitution (Sikkim) Scheduled Tr</li> <li>* The Constitution (Sikkim) Scheduled Tr</li> <li>* The Constitution (Scheduled Castes) Ord</li> <li>* The Constitution (Scheduled Tribes) Ord</li> <li>* The Constitution (Scheduled Tribes) Ord</li> </ul>	Islands) Scheduled Tribes Order, 1959, as amende reli) Scheduled Castes Order, 1962; reli) Scheduled Tribes Order, 1962; ed Castes Order, 1964; led Tribes Order, 1967; Scheduled Castes Order, 1968; Scheduled Tribes Order, 1968; Tribes Order, 1970; stes Order, 1978; bies Order, 1978; Scheduled Tribes Order, 1989; der (Amendment) Act, 1990; ler (Amendment) Act, 1991;	d by the Scheduled Castes and Scheduled	Tribes Order (Amendment)			
2. <sup>#</sup> This certificate is issued on the f	e basis of the Scheduled Castes / Schedule ather/mother* of Shri /Shrimati /Kumari* in District/Division*	of Vi	/Shrimati* illage/Town* ne State State/Union			
Territory*	who belong to the Caste / Tribe* w	which is recognised as a Scheduled Caste				
State / Union Territory*	issued by the	dated				
	and / or					
of	District/Division* of t	he State Union Territory* of	·			
			e:			
		Designatio	on (With seal of the Office)			
Place: State	e/Union Territory*		(with sear of the Office)			
Date:						
* Please delete the word(s) which are n # Applicable in the case of SC/ST Per	not applicable. Sons who have migrated from another State/	UT.				

IMPORTANT NOTES

The term "ordinarily reside(s)\*\*" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950. Officers competent to issue Caste/Tribe certificates:

 District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / City Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner.

2. Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.

- 3. Revenue Officers not below the rank of Tehsildar.
- 4. Sub-divisional Officer of the area where the candidate and/ or his family normally reside(s).
- 5. Administrator / Secretary to Administrator / Development Officer (Lakshadweep Island).
- 6. Certificate issued by any other authority will be rejected.

# FORMAT- IV: OBC-NCL Certificate Format

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### FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES (NCL)\* APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIs), UNDER THE GOVERNMENT OF INDIA

This is to certify	that Shri/Smt./Ku	m**			Son/
Daughter** of	Shri/Smt.**			of	Village/
Town**		Dis	trict/Division**		in
the State/Union	Territory			belongs	to the
		community	that is recognize	d as a backwar	d class
under Government o	of India***, Ministry	of Social Jus	tice and Empow	verment's Reso	lution No.
		dated		****	
Shri/Smt./Kum			and/o	r	
his/her family ordina	arily reside(s) in the			Distric	ct/Division
		~ /** *			

> District Magistrate / Deputy Commissioner / Any other Competent Authority

Dated:

Seal	
*	Visit http://www.ncbc.nic.in for latest guidelines and updates on the Central List of State-wise OBCs.
**	Please delete the word(s) which are not applicable.
***	As listed in the Annexure (for FORM-OBC-NCL)
****	The authority issuing the certificate needs to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.
NOT	E:
(a) Th	te term 'Ordinarily resides' used here will have the same meaning as in Section 20 of the
Re	presentation of the People Act, 1950.
(b) Th	e authorities competent to issue Caste Certificates are indicated below:
(i)	District Magistrate/ Additional Magistrate/ Collector/ Deputy Commissioner/ Additional
	Deputy Commissioner/ Deputy Collector/ Ist Class Stipendiary Magistrate/ Sub-Divisional
	magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner (not
	below the rank of Ist Class Stipendiary Magistrate).
(ii) (iii	Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.

<sup>(</sup>iv) Sub-Divisional Officer of the area where the candidate and/or his family resides

<sup>(</sup>v) Certificate issued by any other authority will be rejected

# **ANNEXURE for FORM-OBC-NCL**

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Sl. No.	Resolution No.	Date of Notification
1	No.12011/68/93-BCC(C)	13.09.1993
2	No.12011/9/94-BCC	19.10.1994
3	No.12011/7/95-BCC	24.05.1995
4	No.12011/96/94-BCC	09.03.1996
5	No.12011/44/96-BCC	11.12.1996
6	No.12011/13/97-BCC	03.12.1997
7	No.12011/99/94-BCC	11.12.1997
8	No.12011/68/98-BCC	27.10.1999
9	No.12011/88/98-BCC	06.12.1999
10	No.12011/36/99-BCC	04.04.2000
11	No.12011/44/99-BCC	21.09.2000
12	No.12015/9/2000-BCC	06.09.2001
13	No.12011/1/2001-BCC	19.06.2003
14	No.12011/4/2002-BCC	13.01.2004
15	No.12011/9/2004-BCC	16.01.2006
16	No.12011/14/2004-BCC	12.03.2007
17	No.12011/16/2007-BCC	12.10.2007
18	No.12019/6/2005-BCC	30.07.2010
19	No. 12015/2/2007-BCC	18.08.2010
20	No.12015/15/2008-BCC	16.06.2011
21	No.12015/13/2010-BC-II	08.12.2011
22	No.12015/5/2011-BC-II	17.02.2014

# FORMAT-V: Disability Certificate

## Form-II

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# (In cases of amputation or complete permanent paralysis of limbs and in cases of blindness) (NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE **CERTIFICATE**)

(See rule 4)

Certificate No			Recent PP size attested photograph (showing face only) of the person with disability Date:
			Dute.
This is to certify that I have care	fully examined	l	
Shri/Smt./Kum.			
son/wife/dau	ghter of Shri		Date of
Birth (DD/MM/YY)	A	geyear	s, male/female
Registration			
War			
Post Office	-	—	
		aph is affixed above, and am	
1. he/she is a case of:	whose photogre		satisfied that.
a. locomotor disability			
b. blindness			
(Please tick as applicable)			
2. the diagnosis in his/her case	is		
3. He/ She has			percent
(in words) permanent physic			.er
(part of body) as per guidelin			
4. The applicant has submitted	-	-	
Nature of Document	Date of Issue	Details of authority issuing	gcertificate

(Signature and Seal of Authorised Signatory of notified Medical Authority)

Signature/Thumb impression of the person in whose favour disability certificate is issued.

### FORM-PwD (III)

### Form-III **Disability Certificate** (In cases of multiple disabilities)

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### (NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE **CERTIFICATE**) (See rule 4)

			Recent PP size attested photograph (showing face only) of the person with disability
Certificate No			Date:
This is to certify that I have carefully examined	1		
Shri/Smt./Kum		son	/ wife/daughter of
Shri		Date	of Birth
(DD/MM/YY)			
male/femaleRegistration N	0		
permanent resident of House No			Ward/Village/Street
Post Offic	ce		
DistrictS	State		

satisfied that:

1. He/she is a Case of Multiple Disability. His/her extent of permanent physical impairment/ disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below, and shown against the relevant disability in the table below:

S. No.	Disability	Affected Part of Body	Diagnosis	Permanent physical impairment/mental disability (in %)
1	Locomotor disability	a)		
2	Low vision	#		
3	Blindness	Both Eyes		
4	Hearing impairment	£		
5	Mental retardation	Х		
6	Mental-illness	Х		

@ - e.g., Left/Right/both arms/legs

- # e.g., Single eye/both eyes
- £ e.g., Left/Right/both ears

2. In the light of the above, his/her overall permanent physical impairment as per guidelines (to be specified), is as follows:

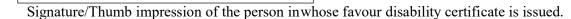
In figures: \_\_\_\_\_\_percent \_\_\_\_\_percent

- 3. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.
- 4. Reassessment of disability is:
  (i) not necessary
  Or
  (ii) is recommended/after \_\_\_\_\_years \_\_\_\_\_months, and therefore this certificate shall be valid till (DD/MM/YY) \_\_\_\_\_\_
- 5. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of Issue	Details of authority issuing certificate

6. Signature and seal of the Medical Authority:

Name and Seal of Member	Name of Seal of Member	Name and Seal of the Chairperson



### FORM-PwD (IV)

### Form-IV Disability Certificate

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### (In cases other than those mentioned in Forms II and III) (NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE) (See rule 4)

			Recent PP size attested photograph (showing face only) of the person with disability
Certificate No		Date:	
This is to certify that I have carefully exar	nined		
Shri/Smt./Kum		son/	/wife/daughter of
Shri		Date	of Birth
(DD/MM/YY)	Age	years,	
male/femaleRegistrat	ion No		
permanent resident of House No			_Ward/Village/Street
Post	Office		
District	State		
	, whose	e photograph is	affixed above, and am

satisfied that he/she is a case of disability.

1. His/her extent of percentage of physical impairment/disability has been evaluated as per guidelines (to be specified) and is shown against the relevant disability in the table below:

S. No.	Disability	Diagnosis	Permanent physical impairment / mental disability (in %)
1	Locomotor disability		
2	Visual Impairment (blindness / low vision)		
3	Hearing impairment		
4	Speech and language disability		
5	Intellectual disability		
6	Mental-illness		
7	Disability caused due to chronic neurological conditions and / or blood disorders		

(Please strike out the disabilities which are not applicable.)

- 2. The above condition is progressive/ non-progressive/ likely to improve/ not likely to improve.
- 3. Reassessment of disability is:

#### a. not necessary Or

- b. is recommended/after years months, and therefore this certificate shall be valid till (DD/MM/YY)
- 4. The applicant has submitted the following document as proof of residence:

Nature of Document	Date of Issue	Details of authority issuing certificate

(Authorised Signatory of notified Medical Authority) (Name and Seal)

Countersigned

{Countersignature and seal of the CMO/Medical Superintendent/Head of Government Hospital, in case the certificate is issued by a medical authority who is not a government servant (with seal)}

Signature/Thumb impression of the person in whose favour disability certificate is issued.

Note: In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District. Note: The principal rules were published in the Gazette of India vide notification number S.O. 908(E), dated the 31st December, 1996.

### FORMAT-VI: INCOME AFFIDAVIT DECLARATION

(To be printed in the non-judicial stamp paper of Rs. 50 under the sign, seal of notary.)

Dr/MR/MRs			(Parents name)
R/O	Village/Ward/Para/Stree	et	
Block/Tehsil		District	
State	PIN No:.		. certify that my Total
Family Annual	Income from all the sources does not	exceed Rs	
(Rupees:			
	) as per the record of the following you derived the annual family income)	Income documents: ( Pls speci	fy the name of Income
i		Date of Issue:	
ii		Date of Issue:	
iii		Date of Issue:	

(Self-attested Copy to be Enclosed).

The following member(s) constitutes our family:

Name of Father	Name of Mother	
Occupation of Father	Occupation of Mother	
Aadhar No of Father	Aadhar No of Mother	
Contact no of Father	Contact no of Mother	
Total Annual Income of Father from all	Total Annual Income of	
the sources	Mother from all the	
	sources	
Documents enclosed	Documents enclosed	

Signature of Father

Signature of Mother

**Signature of Student** 

Jointly declare this affidavit on this date:.....

Name of Student:.....

Branch.....

<u>Note:</u> \*The above matter must be print/type/Write in the non-Judicial stamp paper of Rs. 50 and above. \*The Annual income proof of both Father and Mother have to be submitted along with this affidavit. The Income certificate / Salary certificate/ ITR of assessment 2023-24 etc must be in the name of Father or Mother.

# Format-VII: Declaration for the late submission of Relevant Documents.

Candidate's Deta	ils
JEE	Father Name :
application	
No.	
Date of Birth	Mother Name :
:	
Candidate	Guardian Name
Name :	:

Allotment Details		
Choice No:	Roll No:	
Institute:	Department:	
Allotted from Category:	Quota:	

The following documents are not currently available with me. I undertake that I will submit these documents at the allotted institute by 30<sup>th</sup> September 2023 failing which I shall forego the seat allotted to me.

Sl.No	Documents	Remarks
1		
2		
3		
4		
5		
6		

Date:

Signature of Parent/ Guardian

Signature of the Candidate:

Signature of the verifying Official:

#### FORMAT-VIII: AFFIDAVIT BY THE CANDIDATE

(To be printed and signed in the non judicial stamp paper of Rs. 100)

student with JEE (Main) Application No.) S/D/o Mr./ Ms. \_\_\_\_\_\_, having been admitted to National Institute of Technology Sikkim is hereby abide by undertaking on this affidavit:

1. I do undertake that concealment of any material fact in my application/ production of false documents/ temperament or furnishing of wrong information which might be detected at any stage even after my admission may render me disqualified and any amount paid by me towards institution fees etc. may stand forfeited.

2. I hereby do undertake to devote myself to studies, games and such extramural activities as are recognized by the Institute authority during my stay at the institute and shall appear in all Online classes/ class tests / seminars / quizzes, mid semester examinations and end semester examinations whenever required to do so by the concerned teacher or institute authorities. I shall also abide by all the rules/regulations of the Institute as amended from time to time.

3. I do clearly undertake that my name may be removed from the Roll of the Institute or I may be finally rusticated or expelled from the institute, if I directly or indirectly take part in any movement or agitation to stage Dharna and Strike in the institute for any reasons whatsoever, or which induces directly any other activity that in the opinion of the institute is subversive of institute's discipline.

4. I hereby declare that I was never involved or punished in any case of indiscipline during my School/College career so far. There is no enquiry pending against me with the School/College/ Police/District authorities or any other relevant authority in India or Abroad. In case the above declaration is proved false, then my admission in the National Institute of Technology, Sikkim may be cancelled, the amount deposited be forfeited, and I would not be entitled to any claim whatsoever on the account.

5. I have gone through the rules and regulations regarding ragging and disciplines of the Institution.

6. I hereby solemnly affirm that I shall abide by all the orders of the institute authorities for violation of these rules. I will have no claim against the order of the rustication, and/or expulsion from the institution and/or hostel.

#### Date:

I,

#### Signature of Candidate

I certify that my son/daughter/ward seeks the admission with my knowledge and consent that I held myself responsible for his good conduct, maintenance of discipline, and timely payment of fees during the period he/she is on the Institute Rolls. I undertake to make the payment of Mess and other dues of my son/daughter/ward regularly and timely. I have carefully studied the above undertaking.

Signature of Parents / Guardians
Permanent Address:
Pin Code:
Email:
Phone/Mobile:

<mark>Pg-</mark>18

(full name of

Date: