

NATIONAL INSTITUTE OF TECHNOLOGY SIKKIM

(AN INSTITUTION OF NATIONAL IMPORTANCE, GOVT. OF INDIA) Barfung Block, Ravangla, South Sikkim-737139

FORM III

		Form-III		
Admission through <u>CCMN</u> or thro <u>Candidate data sheet for M.</u> Reporting Date: (Use block letters to fill up the form	<u>Sc 20</u>			Recent passport size photograph
Name of Candidate (as per Certificate/M	ark shee	et) (IN BLOCK LETTERS):	(Not older than 6 months)
Date of Birth: (DD-MM-YYYY):	Gende	r:	Pw	D (Y/N):
Place of Birth:				
State:		Nationality:		
Category (GEN/OBC/SC/ST):		Qualifying Degree Year:		
Qualifying Degree:				
Father's name:		Mother's name:		
Guardian's name:		Relation with Guardian:		
Name of Local Guardian with Address:				
DL	E	-1174.		
Phone No: Occupation of Father:	Em	ail Id: Annual Family Income(R	s.):	
F		(From all sources)		
Occupation of Mother:				
Email ID of Student:		Email ID of Guardian:		
Correspondence Address with Phone nur	mber	Permanent Address with 1	Phon	<u>e Number</u>

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CPF fee details at CCMN (To be filled by Candidate)						
e- Challan		Online Payment	Credit/Debit Card			
Bank & Branch Name						
Amount Paid						
Transaction ID						
Payment Date						
Seat Confirmation	/admission fee	details at NIT Sikkim (To be filled by Candidate)			
e- Challan		Online Payment	Credit/Debit Card			
Bank & Branch Name						
Amount Paid						
Transaction ID						
Payment Date						
	Qua	lifying Degree Details				
Name of Qualifying Exam :						
Department :						
Institute/University :						
Year of Passing :						
Details of Qualifying Exam Marks/Grade (Semester Marks/Grade) :						
$1^{st}:$ 2^{r}	nd :	3 rd :	4 th :			
5 th : 6 th	th :					
Final Obtained CGPA or % (N	Marks/Grade) :					
12 th Standard Marks :						
Year of Passing 12 th Standard :						
Passing Board :						
10 th Standard Marks :						
Year of Passing 10 th Standard :						
Passing Board :						
			(Signature of the candidate)			



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ADMISSION RECORD FOR M. Sc 20 - 20

Admit card/ Roll No :				
(To be filled by admission office) Name (in capital letter) :				
Date of Birth:	Place of Bin	rth :		
Admission Branch:				
Admission Program :		Category :		
Domicile State :		Allotted Category :		
Name of Father :		Name of Mother :		
Name of Guardian :		Relation with Guardian :		
Permanent address with phone no & E-mail		Correspondence address with Phone no & E-mail:		

Details of Payments made:

Name Reporting Centre: N	Reporting Date:				
Details of Fee Submitted at NIT Sikkim Admission Centre					
DD of Tuition & Hostel Fe	ees				
Date of Issue:	Amount:	No:	Branch:		
DD of Boys Mess Fees					
Date of Issue:	Amount:	No:	Branch:		
		V	erified By: Admission In-Charge		



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List of Original/Duplicate certificates deposited during M. Sc Admission, NIT Sikkim				
Name of Student (BLOCK LETTERS):				
List of Collected Items (Please tick $$ the appropriate box	x. Write any r	emarks nex	t to the box)	
		Original	Duplicate	Rem arks (if any)
Copy of admit card				
Certificate of Date of Birth issued by competent authority (High School Board) Certificate as proof of Date of Birth (De Mark Sheet of Class XII/equivalent certificate for Math subject in Class XII (eg: Certificate from NIOS for Mathema Grade/Mark Sheets of qualifying degree examination for al (Final Semester/Year certificate may be University publist copy, only if original certificates not issued by University) Degree/Provisional certificate, if Qualifying Degree is Con results published. Undertaking form in case of result of qualifying deg published/awaited. Migration/Transfer/Conduct (or all as per the availability) from last Institute/University attended Certificate of Social Category (OBC/SC/ST), if applicate Government of India, issued by the competent authority. OBC category, the certificate must be issued on or after Apr if applicable.	OB) nematics as tics) I semesters hed Online npleted and ree is not Certificate ole, as per In case of ril 01, 2017			
Certificate for Persons With Disabilities (PwD), if applicable the competent authority if applicable	e, issued by			
Passport size photographs 4 No's.				
Annual Family income certificate (Last three month Sal parents are government employee & amp; latest Income cert others) and Affidavit declaration (In prescribed format) (H (Desired for future for any scholarship opportunity) Medical Certificate in given format Photo ID proof as per Govt. of India norms	rtificate for			
Undertaking form if any				
If any other :				
Signature of student with date V	Verified By:			
Faculty In-Charge, Academic Affairs:		Signa	ture with Sea	al:
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<u>20 – 20 BATCH</u>

1st Year M. Sc, 1st Semester

STUDENT INFORMATION FORM

Recent passport size photograph

(Not older than 6 months)

1.	Name of the Student (IN BLOCK LETTERS)	
2.	Category (GEN / SC / ST / OBC / PwD / Minority)	
3.	JAM Rank	
4.	JAM Score	
5.	JAM Registration No. & Year	
6.	Allotted Roll No.	
7.	Program Allotted (In Full)	
8.	Date of Birth (dd/mm/yyyy)	
9.	Mobile no of Student	
10.	Landline No (With STD CODE) & Mobile No of Parents	
11.	E-mail Id of Student	
12.	E-mail Id of Guardian	
13.	Languages Known	
14.	Blood Group	



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15.	Any Physical Disability (PwD)	
16.	Father's Name & Occupation	
17.	Mother's Name & Occupation	
18.	Permanent Address	House No: Street Name: Locality: City: District: Post Office: Police Station: State: Pin code:
19.	Name of Local Guardian (In Sikkim If Any) Full Address & Mobile No	
20.	Emergency Contact Details (Name, Contact No., Full Address, Etc.)	
21.	Extracurricular Activity (If Any)	
22.	Cultural Activity (If Any)	
23.	Any Medical Issue Which Requires Regular Monitoring / Treatment (Write "NA" If There Is No Such Issue)	
24.	Specimen Signature (With Date)	

I declare that the information given above are true and can be used by the Institute.

Signature of the Guardian Date:

Signature of the Candidate Date:



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INFORMATION FOR IDENTITY CARD – 20 - BATCH

(Fill up the form in clear hand-writing and no over righting. The photo should be clean and clear.)

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		Recent passport size photograph (Not older than 6 months)	
1.	Specimen Signature (Full Signature)		
2.	IDENTITY CARD No. (For Office use)	NITSKM / MSc / 20	
3.	VALID UPTO (For Office Use)	JULY, 20	
3.	Name of Student (IN BLOCK LETTERS)		
4.	Father's Name (IN BLOCK LETTERS)		
5.	Mother's Name (IN BLOCK LETTERS)		
6.	Program Admitted In (For Office Use)		
7.	DEPARTMENT (Write in full)		
8.	Roll No. (For Office Use)		



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9.	Date Of Birth (dd-mm-yyyy)	
10.	Hostel Address (For Office Use)	National Institute of Technology Sikkim Ravangla, South Sikkim – 737 139, INDIA
11.	Permanent Address	House No: Street Name: Locality: City: District: Post Office: Police Station: State: Pin code:
12.	Student's Contact No. (Mobile)	
13.	Emergency Contact No. Landline (With STD CODE & Mobile No.)	
14.	Blood Group	
15.	E-mail Id of Student	

I declare that the information give above is true and can be used for issuing Identity card.

Signature of Guardian	Signature of candidate
Date:	Date:
Place:	Place: