PSG INSTITUTE OF TECHNOLOGY AND APPLIED RESEARCH, COIMBATORE -641069 STUDENT CERTIFICATE CHECKING FORM ADMISSION TO LATERAL ENTRY – BE/B.TECH

					Appln. No.	:
Name (In Block Letters)	:				Branch	:
Sex (Please √)	:	Male	Female		Nationality	:
Date of Birth	:				Religion	:
Community (Please √)	:	OC/BC/BCN	1/MBC/DNC/S	SC/ST	Caste	:
Father's Name	:				Blood Group	:

Father's Name : (In Block Letters)

(In Block Letters)

Student's Mobile No. : Mother Tongue :

Student's Email ID :

Permanent Residential Address	Address for Communication		
Pincode :	Pincode :		
Details of Father	Details of Mother		
Name :	Name :		
Occupation:	Occupation:		
Address :	Address :		
Mobile No. :	Mobile No. :		
Email ID :	Email ID :		
Annual Income :	Annual Income :		

FOR OFFICE USE ONLY

Certificates to be arranged in the following order:

Certificates to be affailiged in the following order.		
FIRST BUNCH (Please √)	SECOND BUNCH (All ORIGINALS) (Please √)	
Passport Size photo 1 No. & Stamp Size photo 1 No. Certificate Checking Form Physical Fitness Certificate Declaration form (White) Aadhaar Card (Photo copy)	1. Allotment order 2. Community Certificate (Green Card) 3. Transfer Certificate 4. All Semester Marksheets 5. Provisional Certificate / Diploma Certificate 6. Aadhaar Card (Photo copy)	
THIRD BUNCH (Please √)		
One attested Xerox copy of Allotment order	BSc Candidates	
2. First Graduate Tahsildar Certificate (Original)	1. Allotment order	
3. Joint Declaration form signed both student & Parent (Original)	2. Community Certificate (Green Card)	
FOURTH BUNCH (Please √)	 3. Transfer Certificate 4. HSC Mark Sheet 5. All Semester Marksheets 6. Provisional Certificate / Degree Certificate 7. Special reservation certificates (if applicable) 	
,		
Three attested Xerox copies of Allotment order		
2. Three attested Xerox copies of First Graduate		
Tahsildar Certificate		
3. Three attested Xerox copies of Joint Declaration form	7. Opecial reservation certificates (ii applicable)	
3. Three attested Xerox copies of Joint Declaration form FIFTH BUN	, , ,	

A set of attested Xerox copies of all Semester Marksheets, X STD Marksheet, Provisional Certificate, TC & Community Certificate (2 Nos.)

Date: CHECKING OFFICER PRINCIPAL

DECLARATION FORM

I hereby solemnly and sincerely affirm:

- 1. That the statements made and information furnished in my son's / daughter's / ward's application as also in all the enclosures there to submit by him / her are true. Should it however, be found that any information furnished there in is untrue in material particulars. I realize that I am liable to criminal prosecution and I also agree to the forfeiture of the seat in the institution.
- 2. That I have read the eligibility regulations and am satisfied that my ward is for admission to the course, as per University, Government norms.
- 3. That my son / daughter / ward would confirm strictly to all the rules and regulations in for or which may be introduced in the institution hereafter and that I realize that breach of discipline and rules on my son's / daughter's / ward's part would entail summarily forfeiture of his / her seat in the institution.
- 4. That I am aware that if my son / daughter / ward does not put in a minimum of 75 percent attendance during the year / semester, my son / daughter / ward will not be eligible to write the semester examinations and will have to repeat the course of study in that semester at its next normal commencement.
- 5. That I am aware that the curriculum for the various courses is liable to be revised or modified and that my son / daughter / ward will follow the syllabi for the various courses in force at the time of his / her admission and that any revision or modification made in the syllabi during the course of his / her study in the institution will be binding on him / her.
- 6. That in case my son / daughter / ward becomes a scholarship holder or comes to enjoy educational concessions like half fee or full fee etc., and does not show special progress, the scholarships or educational concessions are liable to be cancelled and that if my son's / daughter's / ward's conduct and character are not good these will be cancelled summarily.
- 7. That my son / daughter / ward involved in breach of discipline and disobeying of rules or bad conduct in extracurricular activities, he / she will also entail summarily forfeiture of seat in the institution, in addition to such other proceedings that may be taken against him / her.
- 8. That I am aware that if my son / daughter / ward is admitted into the hostel he / she will strictly abide by the rules and regulations in force in the hostel and that any breach of discipline or rules or any unruly conduct or undesirable activities will be summarily dealt with by the forfeiture of seat both in the hostel and the institution in addition to such other proceedings that may be taken against him / her.
- 9. We agree that my son / daughter / ward will be bound by and abide by such rules and regulations relating to curricula, examination assessment and other academic matters as may be framed from time to time by the Anna University.

(Signature of the Candidate)

(Signature of the Parent)

Name and Address In BLOCK LETTERS

Name of the Candidate

DETAILS OF ACADEMIC MARK

Name of the Candidate :

Roll No. :

Branch :

Community :

SI. No.	Semester	Maximum Marks	Marks Obtained	% of Marks
1	l			
2	11			
3	III			
4	IV			
5	V			
6	VI			
7	VII			
8	VIII			

Branch Studied in Diploma Level :

Month & Year of Passing :

ANNEXURE AFFIDAVIT BY THE STUDENT (Format 1)

I,				(full name of th	e student with adm	ission / registration
/enroln	nent number) s/o –	d/o Mr./Mrs./Ms.				1001011710510111011
1)	COIMBATORI Higher Education	itted to PSG INSTIT 641062 have receive al Institutions, 2009, (ntained in the said Reg	d a copy of the AI hereinafter called	CTE regulations of	n Curbing the mena	ace of Ragging in
2)	I have, in particu	lar, perused clause 4 o	f the Regulations a	and am aware as to	what constitutes ra	agging.
3)	administrative ac	n particular, perused clause 8 and clause 8.4(a) of the Regulation and am fully aware of the penal and re action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or being part of conspiracy to promote ragging.				
4)	a) I will not indu Regulationsb) I will not part	aver and undertake the alge in any behavior or icipate in or abet or pragging under clause	act that may be co	ny act of commiss		
5)	I hereby affirm the Regulations, with any law for the tire	at, if found guilty of ra out prejudice to any ot ne being in force.	agging, I am liable her criminal action	for punishment ac that may be take	ecording to clause 8 n against me under	.4(a) of the any penal law or
	account of being f that, in case the de my word is liable		ng or being part of be untrue, I am aw	a conspiracy to pr vare that my admis	omote, ragging; and sion	ne country on I further affirm
Declare	ed this	day of	Processing Processing III	onth of	year	,
Signatu Name	are of Deponent	·	•	· .		
			VERIFICATION)N		
		of this affidavit are true or misstated therein.		knowledge and n	o part of the affidav	it is false and
Verified	at	_(place) on this the _	(day	of (month) (year)	
		· .		·•	•	
Signatur	e of deponent	4*				
Solemnly affidavit	•	ned in my presence on	this the (day) of n	nonth, (year) after	reading the content	s of this

OATH COMMISSIONER $_{_{\boldsymbol{x},\cdot}}$

ANNEXURE II AFFIDAVIT BY THE PARENT / GUARDIAN

(Format 1)

1 Mr./N	1rs. / Ms. (full name				
of the nar	ent / guardian) father / mother / guardian ofe of the student with admission / registration / enrolment number),				
1	having been admitted to PSG INSTITUTE OF TECHNOLOGY AND APPLIED RESEARCH, COIMBATORE 641062 have received a copy of the AICTE regulations on Curbing the menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.				
. 2) I have, in particular, perused clause 4 of the Regulations and am aware as to what constitutes ragging.				
3	I have also, in particular, perused clause 8 and clause 8.4(a) of the Regulation and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively or being part of conspiracy to promote ragging.				
	 a) I will not indulge in any behavior or act that may be constituted as ragging under clause 4 of the Regulations b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 4 of the Regulations. 				
	I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 8.4(a) of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.				
	I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration I s found to be untrue, I am aware that my admission my word is liable to be cancelled.				
Declare	d this day of month of year				
Name : Address Telepho	ne / Mobile No: VERIFICATION				
Verified nothing	that the contents of this affidavit are true to the bost of my knowledge and no part of the affidavit is false and has been concealed or misstated therein.				
Verified	at(place) on this the(day)of (month) (year)				
Signatu	re of deponent				
-	y affirmed and signed in my presence on this the (day) of month, (year) after reading the contents of this				

PSG INSTITUTE OF TECHNOLOGY AND APPLIED RESEARCH, COIMBATORE - 641062

PHYSICAL FITNESS CERTIFICATE

I do hereby certify that	I have examined Thi	ru / Selvi	
a candidate for admission	to the		
Programme and confirm			
or bodily infirmity except	(*)	,	
(*) I do not consider this	as a disqualification	or undergoing the co	ourses in Engineering
His / Her age acco	rding to his / her owr	statement is	years and
by appearance about	years.	Hė/she has m	arks of small pox /
vaccination.	•		
Personal marks of ider	ntification		
1.			
2.	•		in the second se
Blood Group & Rh Type	3 :	•	
General Examination :	Heightcms;	Weight	kgs.
		B.P r	
	Resp.Rate,	/ Min; Inspcm	s; ExpCms
		. •	
Date:	•		
Place:		Signature of N	1edical Officer with seal
(*) any defect or other d	isabilities when prese	ent should be noted	n details.