



(A State university established by Government of NCT of Delhi)

**Enrollment form**

Name : \_\_\_\_\_

Programme :  CSAI  CSAM  CSB  CSD  
 CSE  CSSS  ECE  EVE

Email ID : \_\_\_\_\_

Mobile No. : \_\_\_\_\_

Emergency contact no. (Parents) : \_\_\_\_\_

Correspondence Address; \_\_\_\_\_

Permanent Address; \_\_\_\_\_

I hereby certify that the information/documents provided by me for admission in the Institute are true to the best of my knowledge and nothing has been concealed by me. In case the information/documents are found false at any stage, I undertake that I shall be responsible for the same and liable to termination of my registration from the programme.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Candidate

**For official use only**

Roll No. Alloted : \_\_\_\_\_

\_\_\_\_\_  
Signature of DM/ AM/ JM