



# PCTI Educational Society



Corporate Office: 2nd Floor, RU Block,

DDA Commercial Complex, Pitampura, Delhi - 110034

(A Registered Society Under Society Registration Act XXI of 1860 And ISO 9001:2008 Certified)

## Admission Form

Appl. No. ....

YEAR: 20.....

Please read carefully IMPORTANT INSTRUCTIONS TO CANDIDATES Before filling up.  
(No column should be left blank) (WRITE IN BLOCK LETTERS)

Name of the Program: \_\_\_\_\_

Information Center Code: \_\_\_\_\_

Information Center Name: \_\_\_\_\_

### For Office Use Only

Roll No. ....

Serial No. ....

1. Name of the Candidate: \_\_\_\_\_

2. Father's Name: \_\_\_\_\_

3. Guardian's Name: \_\_\_\_\_

(If applicable) Relationship: \_\_\_\_\_

4. Date of Birth (dd/mm/yyyy): \_\_\_\_\_

5. Male/Female: \_\_\_\_\_ M for Male, F for Female

6. General (GEN) / SC / ST / OBC / Physically Handicapped (PH): \_\_\_\_\_

7. Permanent Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_

8. Correspondence Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_

9. Communication Numbers (with STD Code): (O) \_\_\_\_\_

(R) \_\_\_\_\_ (M) \_\_\_\_\_

10. Email Address: \_\_\_\_\_ @ \_\_\_\_\_

11. Academic Qualification

Exam Passed	University/ Board/ Institute	Year	Class (%)

ATTACH HERE  
PASSPORT SIZE  
PHOTOGRAPH  
  
DO NOT DEFACE  
IT

:2:

12. Demand Draft (DD) Details:

(a) In favour of " \_\_\_\_\_ " payable at \_\_\_\_\_  
 Crossed Bank Draft No. \_\_\_\_\_ Date \_\_\_\_\_ Amount Rs. \_\_\_\_\_  
 Bank Name \_\_\_\_\_

Candidate are advised to write their Name, Application No., Information Cell Code & Information Cell Name and Programme applied for, without fail, at the back of the Bank Draft.

13. List of documents attached (Please fill without fail)

1. \_\_\_\_\_ 2. \_\_\_\_\_  
 3. \_\_\_\_\_ 4. \_\_\_\_\_

**Declaration by the Candidate:**

I acknowledge to have fully read the prospectus and certify that I have understood all the provisions indicated therein. I certify that I am qualified for the program as indicated in the prospectus. I hereby certify that all particulars stated by me in application are true to the best of my knowledge and belief. I understand that my admission is liable to be cancelled if I suppress or distort any information furnished in my application. I understand that PCTIES reserves the right to modify/delete the syllabi, program structure, rules and regulations, as and when required. I understand fees once paid will not be refunded. I understand that the PCTIES reserves the right to cancel the admission without assigning any reason.

Place: .....

Date: .....

Signature of the Candidate

**Information Cell**

I certify that I have personally verified the original certificates and the attached documents including DD's. I certify that the candidate fulfill the eligibility criteria as per Admission Qualification norms prescribed in the prospectus. I shall be held responsible for any kind of litigation with regards to services.

Place: .....

Date: .....

Information Cell Seal

Signature of Co-Ordinator

**Note: Candidates are required to attach the following documents with this form:**

- (a) Attested photocopies of the Certificates/ Detailed Marks Cards of the qualifying exams.
- (b) Crossed Dds.