

Application Number :

LOURDES MATHA COLLEGE OF SCIENCE & TECHNOLOGY



Lourdes Hills, Kuttichal P O, Thiruvananthapuram – 695574 | Phone : 0472-2853550 / 2853546
 Fax : 0472-2853846 | E-mail : info@lmct.ac.in | Website : www.lmct.ac.in | City office : 0471-2302481

Minority Status Educational Institution | Approved by AICTE & Affiliated to the Kerala Technological University
 Member of Kerala Catholic Engineering College Managements' Association
 Managed by Lourdes Matha Catholic Educational Society



APPLICATION FORM FOR ADMISSION TO M.TECH PROGRAMME 2017-'19

DD/Cash Receipt No :

Dated : DD / MM / YYYY

(Fill in block letters or tick wherever is applicable)

- CONTROL SYSTEMS COMPUTER SCIENCE AND ENGINEERING
 APPLIED ELECTRONICS & INSTRUMENTATION

Affix a recent stamp size
 photograph of the
 Applicant

(Do not staple)

01. NAME OF APPLICANT (As entered in 10 th certificate)															
02. DATE OF BIRTH				D	D	M	M	Y	Y	Y	Y	03. GENDER		M	F
04. AADHAR NO.						05. CASTE									
06. RELIGION						07. COMMUNITY									
08. ELIGIBLE CATEGORY			OPEN	CHRISTIAN	SYRO MALABAR	SC/ST	SPONSORED	NRI							
09. ADDRESS			Permanent						Communication						
			PIN						PIN						
10. PHONE NUMBER & E-MAIL ID															
11. NAME OF PARENT / SPOUSE						OCCUPATION									
12. PHONE NUMBER & E-MAIL ID															
13. NATIONALITY						14. ANNUAL FAMILY INCOME									
15. DETAILS OF EDUCATIONAL QUALIFICATIONS (SSLC/HSE/CBSE/ISC/OTHERS)															
COURSE	EXAM [Kerala HSE / CBSE / ISC / VHSE / Others]	YEAR OF PASSING	BOARD	NAME OF INSTITUTION	% OF MARKS										
X															
XII															

16. DETAILS OF QUALIFYING EXAMINATION				
B.TECH. / EQUIVALENT DEGREE	NAME OF UNIVERSITY	REG. NO.	NAME OF INSTITUTION	BRANCH

17. GPA / PERCENTAGE OF MARKS IN B.TECH / EQUIVALENT DEGREE								
CGPA / %	SEM I	SEM II	SEM III	SEM IV	SEM V	SEM VI	SEM VII	SEM VIII

18. DETAILS OF GATE , IF ANY	REGISTER NO :		GATE SCORE	
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19. DETAILS OF DTE REGISTRATION	APPLICATION NO:		DTE RANK	
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20. OTHER QUALIFICATIONS, IF ANY	
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21. TEACHING / OTHER EXPERIENCE			
NAME OF INSTITUTION	DESIGNATION	NO. OF YEARS OF SERVICE	DETAILS OF EXPERIENCE CERTIFICATES ATTACHED

DECLARATION BY THE APPLICANT

I, solemnly declare that the details furnished are true. I also undertake that any wrong information furnished by me will forfeit my claim for admission. I will obey the rules and regulations of the instituion, if admitted. I shall submit all certificates and documents in original at the time of admission, failing which my admission will be liable for cancellation.

I shall not resort to ragging in any form at any place and shall abide by the rules/laws prescribed by Courts, Governments, affiliating University & College authorities for the purpose from time to time.

Place :

Date :

Name & Signature of the Applicant

DETAILS OF DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION

- 1 Certificate of SSLC/ Equivalent and HSE/Equivalent.
- 2 Marklist of all semesters / years and Degree Certificate / Provisional Certificate
- 3 Sponsorship Certificate (if any)
- 4 Admit card & Score card of GATE and DTE Rank (if any).
- 5 For downloaded application, a DD of Rs 500/- drawn in favour of Principal, LMCST payable at Trivandrum.
- 6 Community certificate (if any)

FOR OFFICE USE ONLY

Certificates verified

Fees paid Rs :

Name and Signature of the Office Superintendent

Admission No. :

Admission Granted / Rejected

Date of Admission :

Orders of Director / Principal