| Adm.No |) : |
|--------|------------|
| | |

KRISHNACHAITANYA INSTITUTE OF TECHNOLOGY & SCIENCES::MARKAPUR

STUDENT INFORMATION

| 1. | Name of the Student | : | | | | |
|-----|----------------------------------|-------------|--------|-------------|-------|----|
| 2. | Father Name | : | | | | |
| 3. | Occupation/Annual Income | : | | | | |
| 4. | Mother Name | : | | | | |
| 5. | Address for Communication | : | | | | |
| 6. | Phone Number(R) | : | | Mobile No | : | |
| | | | | | | |
| 7. | Aadhar number | : | | | | |
| 8. | Category(OC/BC/SC/ST/others) | : | | Sub Catego | ory: | |
| 9. | Mother Tongue | : | | Nationality | : | |
| 10. | Seat Category | : | | | | |
| 11. | Date of Birth of Candidate | : | | | | |
| 12. | . Identification Marks | : 1. | | | | |
| | | 2. | | | | |
| 13. | EAMCET/ ECET | : Hall Tick | et No: | | Rank: | |
| 14. | Branch Looking for | : 1. | 2. | 3. | 4. | 5. |
| 15. | Intermediate College name | : | | | | |
| 16. | Inter Group Marks and % | : | | | | |
| | | | | | | |

Undertaking by the student

I have gone through the instructions and will abide by all the conditions failing which the institute may take any action deemed necessary on the matter. I hereby undertake that in case I discontinue my studies at **KITS**, **Markapur** for any reason I will pay the tuition fees for the entire course duration. I am fully aware that if i fail to pay the said fee, my Original Certificates and TC will not be issued to me. Further the institute can take any other steps that it deems fit for recovery of fees due from me. I also read the rules and regulations of ragging act and related punishments as per Act 26 of 1997 promulgated by A.P. Legislature Assembly. I give this undertaking that I will not associate/participate in such activities during my stay in this college.

| Date: | Signature of the student |
|----------|--------------------------|
| Station: | |

UNDERTAKING BY THE PARENT

Instructions to candidates regarding discipline and ragging are read by me. I assure and see that my ward abides by the instructions stipulated by the institute. I will pay all the necessary fees during the beginning of every academic year as per notice issued by the college. I will be responsible for the good conduct of my ward during his/her study in the institute. I shall visit the institute at regular intervals to enquire about my ward's progress and conduct. Further I will pay the tuition fees for the entire period of duration of the course even in case my ward discontinues at College mid-way.

I shall take care that my ward upholds his/her undertaking given in respect of ragging and other disciplinary rules contained in the instruction sheet.

Date:

Signature of the Parent/Guardian:

| Station: | | | | Name: | | |
|----------|--------------------|----------------------|-----------------------|-------------------|---------|---------|
| | | | | | | |
| | Fee Details | Tuition Fee | University Fee | Hostel Fee | Bus Fee | Remarks |
| | I – Year | | | | | |
| | II – Year | | | | | |
| | III- Year | | | | | |
| | IV- Year | | | | | |
| | | | (For office | use only) | | |
| Bra | anch of Admission | 1 | : | | | |
| Со | llege Admn. Num | ber& Roll no | : | | | |
| Со | llege Admission F | ee Payment Particula | rs : Amount Rs | Recei | pt No | |
| Da | te of Admission to | o the college | : | | | |

PRINCIPAL