

UNIVERSITY COLLEGE OF ENGINEERING

OSMANIA UNIVERSITY, HYDERABAD - 500 007

APPLICATION FORM FOR M.E./M.TECH. REGULAR ADMISSIONS (2019-20) UNDER SPONSORED CATEGORY

Please	tick	mark	(√)	appropriate	boxes

Department to which Admission is sought:

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ee ¡	articul	ars:	Rs.	. 500/-						
_						D.D. in favour of	"Principal,	UCE, OU,	Hyd"	_
	Office U stration		ly						To be filled in by Candid	
1.	Depart	ment	to wh	ich ac	lmissi	ion is sought:			me of the Candio (In Block Letters)	ıat
2.	Date of	f Birth	:					Mr./Ms	5	
3.	Sex: M	ale / F	emal	е						
4.	Hall Tic	cket N	o/Reg	gd.No	:				Affix Passport	
5.	GATE/	PGECE	T Ran	ık:					Size	
6.	. B.E./B.TECH AGGREGATE % OF MARKS							Photograph		
				Signa	ature	of Scrutinizing	Officer		Thotograph	
1.	Full nam (In Block L		candic	date: M	r./ Ms.		:			
2.	a) Fa	ather's /	Guard	ian's N	ame (if	father is not alive)	: Mr./ Ms.			
	b) O	ccupatio	on of Fa	ather/G	uardiaı	n	:			
	c) M	other's	Name				:			
3.	Permane	ent Pos	tal Addı	ress			:			
4.	Address (Note:- A	Any cha			s must	be immediately	:			
		obile No	o:			(b) E-mail I.D				
5.	Date of I (Accordi		S.C. or	· equiva	alent)		Date	Month	Year	

Employment detail	s:-
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i) Name & Address of the Employer

ii) Designation & Nature of the Employment

Note: (i) Enclose permission letter to pursue the course, without which the admission will not be made.

(ii) Enclose certificate of a minimum of two years experience as on 31st July, 2019 reckoned from the date of qualifying degree, failing which the application will be rejected.

7. Education Qualifications:

Examination	Board/Univ. &	NAME OF THE INSTITUTION	DIVISION	AGGREGATE	MONTH &	OPTIONAL
	period of	TOWN/CITY & DIST		% OF MARKS	YEAR OF	SUBJECTS/
	study				PASSING	BRANCH OF
						ENGG.
SSC Or						
Equivalent						
Turka uma a diaka au						
Intermediate or equivalent						
Diploma in						
Engineering						
B.E/B.Tech/ AMIE/AMIETE						
74112/7411212						
B.Sc.						
3.00.						
MSc./MCA or						
equivalent						

DECLARATION

I PROMISE TO ABIDE BY THE RULES, REGULATIONS AND ORDERS OF THE OSMANIA UNIVERSITY.

I declare that the statements I have made in this application are correct and complete. I have not suppressed any information. I fully understand that my admission will stand cancelled in case any information supplied by me is found to be false at any stage. Further, I shall be responsible for payment of fees, and good behavior/conduct during the period of my study at the college.

Place :	
Date :	Signature of the Candidate