

**NIELIT Aurangabad, Maharashtra (India)**  
**Registration Form - M.Tech(EDT) Full Time Course**

To,  
The Director,  
NIELIT Aurangabad,  
Dr.BAM University Campus,  
Aurangabad, 4310004 (MS)

**Important Instructions**  
Form should be signed by the student.  
Incomplete form will not be accepted.  
Mail scanned copy of filled form to  
[mtech-abad@nielit.gov.in](mailto:mtech-abad@nielit.gov.in) before **12 Aug16**

Sir/Madam,

I have passed B.E/ B.Tech course in Electronics/Electrical / Telecommunication /Instrumentation engineering etc approved by AICTE. I hereby register for admission to I<sup>st</sup> Semester M.Tech (Electronics Design & Technology ) Full Time Course **under Sponsored/Gate/Non Gate Category** (tick the appropriate ) during the Academic year 2016-2017 and request you to kindly grant me admission to the said course at NIELIT Aurangabad. I submit my particular as under:

Name of Candidate: _	
Mother's Name :	
Father's Name: _	
Date of Birth :	
Category:	OPEN/SC/ST/OBC/PWD ( tick appropriate)
<b>Address for Correspondence</b>	
Pin:	
E-mail ID:	Mobile number:

B.E/B.Tech Branch:		Gate Score Details		Working Experience	
Year	% marks				
1st		Year		Name of Industry / Institution	
2nd		Discipline			
3rd		Marks		Type of Work / Experience	
4th year					
Average				Experience in years	

**Please visit our website frequently for updates.**

**Candidate Signature with date :-**