



भारतीय सूचना प्रौद्योगिकी संस्थान कोटा
INDIAN INSTITUTE OF INFORMATION TECHNOLOGY KOTA

2nd Floor, Prabha Bhawan, MNIT Campus, JLN Marg, Jaipur -302017

Ph: 0141-2715071, E-Mail: office@iiitkota.ac.in

Application No. _____

Documents Checklist

(For office use only)

Student Name : _____

Student JEE Mains Roll No : _____

Branch Name : _____

Student Registration ID : _____

Opts to participate in Special Round (YES /NO) : _____

Paste your recent
passport size
photograph here

Sr. No.	Particular	Verified	Pending
1	Provisional allotment letter issued by JoSAA/CSAB 2020		
2	JEE Mains Score Card		
3	Proof of Date of Birth (X class pass Certificate/ Grade Sheet)		
4	Grade Sheet of Qualifying Examination (XII Grade Sheet)		
5	Character Certificate (from the last school/institute attended in Original)		
6	Transfer Certificate (in Original)		
7	Migration Certificate (in Original)		
8	Medical Certificate issued by the recognized/reputed Hospital (in Original)		
9	Caste Certificate (SC/ST/OBC/EWS) as submitted to JoSAA (if applicable)		
10	Certificate of Physical Handicapped (if applicable)		
11	Aadhar Card (Mandatory)		
12	ID Proof (PAN Card/Voter ID Card/Govt. issued ID Card)		
13	Gap Certificate (if there is a gap after passing qualifying examination)		
14	JoSAA Fee Payment Receipt		

Registration Procedure Progress (To be filled by Office only)

- Physical Reporting (Through JoSAA 2020 Allotment Letter).
- Registration Form and File Preparation.
- Documents Upload.
- Document Update and Verification.
- Payment Verification.
- Documents Filing.

Verified by.....

Signature.....



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ADMISSION FORM ACADEMIC SESSION 2020-21

Date of Admission (dd/mm/yyyy)	___ / ___ / _____	Semester	
Student ID (By Office)		Branch	

Paste Your Photograph Here

PLEASE USE BLOCK LETTERS

Student Name (In English)			
Student Name (In Hindi)			
Father's Name (In English)			
Father's Name (In Hindi)			
E Mail ID			
Date of Birth (DD/MM/YYYY)		Nationality	
Gender		Mobile No.	
Blood Group		Aadhar No.	
Admitted Under Category		Sub-Caste	Physically Disabled (Yes/No)
Name of Programme:	4 year B Tech in CSE / ECE	Day Scholar / Hosteller	
Born State		12 th State	
Address for Communication			
	District:	Pin Code:	
	State:	Country: India	
Permanent Address			
	District:	Pin Code:	
	State:	Country: India	

Local Guardian Name (If any)		Relationship with Student	
Guardian Address			
Nominee Name (For Mediclaim)		Nominee Relation	

Educational Qualifications

S. No	Qualification	Discipline/Subjects	Board/Institute/University	Passing Year	% Marks/CGPA
1	10 th				
2	10+2 th				
3	Others				

Declaration

- I am eligible for registration.
- I do hereby agree to abide by all the Ordinances/Statues and regulations of the institute enforced from time to time.
- I do certify that entries made by me in this form are correct to the best of my knowledge.
- I hereby solemnly declare that will maintain good conduct throughout may stay in this institute.
- I understand that the institute reserves the right to cancel my admission at any time during my stay at this institute if it is in interest of the institute to do so.
- I understand that if any document is found forged at any stage during my course of study, will automatically stand cancelled and legal action would be taken against me.
- I have submitted all the documents listed in the below table.

S. No	Particular	Submitted	Pending
1	Provisional allotment letter issued by JoSAA/CSAB 2020		
2	JEE Mains score card		
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Date:

Signature of Student



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Online Reporting

Student Name: _____

JEE Mains Roll Number: _____

Admitted Category: _____

Student has produced Caste Certificate: _____

Student belongs to PwD Category: _____

JoSAA Payment Details

Amount paid (JoSAA participation fee)		Amount paid (Partial admission fee)	
Date (DD/MM/YYYY)		Date (DD/MM/YYYY)	

Date:

Signature of the Student



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THE HONOUR CODE

IID No.....do hereby undertake that as a student at IIIT Kota

1. I will not give or receive aid in examination; that I will not give or receive unpermitted aid in class work, in preparation of reports, or in any other work that is to be used by the instructor as the basis of grading ; and
2. I will do my share and take an active part in seeing to it that others as well as I uphold the spirit and letter of the Honour Code. I realize that some examples of misconduct which are regard as being in violation of the Honour Code include:
 - Copying from another's examination paper or allowing another to copy from one's own paper;
 - Unpermitted collaboration
 - Plagiarism ;
 - Revising and resubmitting a marked quiz or examination paper for re-grading without the instructor's knowledge and consent;
 - Giving and receiving unpermitted aid on take-home examinations;
 - Representing as one's work the work of another, including information available on internet and Giving or receiving and on an academic assignment under circumstances in which a reasonable person should have known that such aid was not permitted.
 - Committing a cyber-offense, such as breaking passwords and accounts, sharing passwords, electronic copying, panting viruses, etc.
 - I accept that any act of mine that can be considered to be an Honour Code violation will invite disciplinary action.

Student's Signature.....

Name.....

Date.....

ID No......



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Declaration and Undertaking by the Parents and Students

I undertake to pay all institute fees and subsidiary fund dues in respect of my ward/son/daughter Shri/Ms. _____ who is being admitted to the IIIT Kota. My profession is _____ and my monthly income is Rs. _____. I have sufficient means to defray the expenses to be incurred during his/her stay in the institute. I hereby assure that my ward/son/daughter will abide by all ordinances/statutes and regulations of the institute. I hereby certify that the entries made by my ward in this form are correct to the best of my knowledge and belief.

Place:

Signature of Parent/Guardian

Date:

Full Name _____

Undertaking of awareness of medical facilities at MNIT Jaipur Dispensary

I _____ father/mother/guardian of Mr./Ms. _____ hereby declare the following in respect of my ward to be admitted to B. Tech course at IIIT Kota. I am aware that: The MNIT Jaipur Dispensary located in the campus and run by MNIT, Jaipur for its community has limited facilities. The MNIT Jaipur Dispensary may not be adequate for treatment of any patient with chronic or serious ailments. It is the responsibility of the guardians to take care of their wards for outside treatment. Despite the best efforts on the part of MNIT, Jaipur if any untoward thing happens to my ward, I shall not hold the institute accountable for the same and will not seek any financial help or compensation for the same from any court of law.

Date:

Signature of Parent

Undertaking for not including in any kind of ragging and indecent behavior towards juniors as a senior student

I _____ ward /son/ daughter of Mr./Ms. _____ hereby give an undertaking that I will not indulge in any kind of ragging and indecent behavior towards juniors students during my entire stay at MNIT Jaipur /IIITK. Also, I am aware of the fact that at any stage if I am found to violate above undertaking, the MNIT Jaipur/IIITK authorities may take suitable action that includes expelling me from Institute. I will not challenge action taken for such violation in any court of law.

Date:

Counter signature of the Parent/Guardian

Signature of Student

Undertaking by the student for not owning motor driving vehicles for Commuting inside MNIT Jaipur Campus

I _____ ward/son/daughter of Mr. /Ms. _____ hereby give an undertaking that I will not own/drive motor driven vehicle for commuting inside the MNIT Jaipur authorities may take suitable action that includes expelling me from Institute.

Date:

Counter signature of the Parent/Guardian

Signature of Student



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UNDERTAKING

IS/o/D/o Shri..... student
of B. Tech* (CSE / ECE) Semester* (I / III / V / VII) Students ID Number
hereby undertake to shift / vacate the accommodation allotted for the hostel as and when
required since the present accommodation is being provided to me as a temporary
arrangement until the special round. I will deposit the chargeable amount.

*Strike out whichever is not applicable.

Signature of Student

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