



<b>**</b>	:				
Allotted Room No.:-					
Student Name (Block Letter Only)		Mob. No.			
Father's Name		Mob. N	Iob. No.  Passport Size Photo		
Mother's Name		Mob. N	No.	rassport size r noto	
Category				_	
Inst. Roll No.					
Branch/Department					
Inst. Email Address					
Present Address- Permanent Address-					
Local Guardian Address:					
Local Guardian Conta	ct Detail:				
Student Signature:-					
Date:-					
	<u>F</u> (	OR USE O	NLY OFFIC	<u>E</u>	
Desciving MTS Street	Signature	-4		Office Stamp	
Receiving MTS Staff Signature		Date :			
		Care Taker Cum-Clerk Sign. :			