

APPOLYCET-2017 ADMISSIONS

APPLICATION FOR LEFTOVER SEATS IN MINORITY COLLEGES

THE FOLLOWING INFORMATION SHOULD BE SENT TO THE CONVENER, POLYCET-2017 ADMISSIONS , GOVERNMENT POLYTECHNIC,BENZ CIRCLE,VIJAYAWADA – 520008.

S.No.	Name of the Field	Details furnished by candidate
1	Name of the Candidate	
2	Father's Name	
3	Date of Birth	
4	Aadhar Number	
5	Sex	
6	Caste Category	
7	Minority: Muslim/Christian	
8	G.P.A IN 10 TH CLASS /Equivalent	
9	Region (AU/OU/SVU)	
10	Year of passing qualifying examination	
11	SSC/Equivalent Exam Hall Ticket Number, month and year of passing	
12	Demand Draft Number/Name of Bank/ Amount / Date	
13	Mobile Number	
14	Email Address	
15	Address for Communication	
16	Aadhar Card Number	

DECLARATION

I declare that the Information given above is correct to the best of my knowledge and belief. I am aware that I will be considered for leftover seats in minority colleges only after exhausting all the qualified minority candidates and I am not eligible for fee reimbursement scheme.

Signature of the candidate

Place :
Date :