

**APPLICATION FOR ADMISSION TO FIRST YEAR OF 3 YEAR DIPLOMA PROGRAMME IN
HANDLOOM AND TEXTILE TECHNOLOGY 2020-2021,**

I.I.H.T., SALEM / SPKM I.I.H.T., VENKATAGIRI / KHTI, GADAG / I.I.H.T., KANNUR

Affix recent
Passport size
Photo

1. Full Name of the Applicant :
(in capital letters)
2. Father's Name :
3. Mother's Name :
4. Address to which communication :
should be sent (with PIN Code)

Mobile Number /Phone Number :
with STD Code (Compulsory)

E Mail Address, if any :

Aadhar Card No :

5. Date of Birth : Age as on 01 .07.2020_____

6. Name of the State to which the
applicant belongs

7. Whether the applicant belongs to : YES / NO
Weaver's Community or engaged
in the weaving profession?

8. Whether the candidate belongs to
- | | | | | | | | |
|-------|--------------------------|------|--------------------------|------|--------------------------|-----|--------------------------|
| OC/UR | <input type="checkbox"/> | BC | <input type="checkbox"/> | BC-M | <input type="checkbox"/> | MBC | <input type="checkbox"/> |
| SC | <input type="checkbox"/> | SC-A | <input type="checkbox"/> | ST | <input type="checkbox"/> | EWS | <input type="checkbox"/> |

9. Name of the school or college last
attended :

10. Year & Month of passing :
SSC/SSLC or Equivalent examination

11. Marks obtained at SSC/SSLC or Equivalent Examination :

S No	Subjects	Marks obtained	Maximum Marks	Percentage

12. Whether the applicant passed the qualifying examination : YES / NO

List of enclosures (as applicable)
(All copies of certificates should be attested)

1. SSC/SSLC or Equivalent examination marks list.
2. Transfer Certificate.
3. Caste/ Community Certificate.
4. Weaver's Community Certificate. (If claimed)
5. Nativity/Domicile Certificate.
6. Proof of Age (Birth Certificate or TC).
7. Aadhar card

We declare that the particulars furnished above are true and correct to the best of our knowledge and belief.

Signature of Father (or) Guardian

Signature of the applicant

Name in full :

Name in full :

Place :

Dated :

DECLARATION BY APPLICANT

In the event of my being admitted to the Institute, I undertake to observe and abide by the disciplinary rules and regulations of the Institute that may be laid down by the Government from time to time during the period of training.

I hereby agree to abide by and satisfy the rules regarding the attendance and if my attendance falls short of the minimum percentage of 75% at the end of the year, I shall not claim condonation thereof under any circumstances whatsoever and I may not be permitted to sit for the examination.

(Signature of the Applicant)

Signature of Witness : _____

Address :

CERTIFICATE OF PHYSICAL FITNESS

I have examined Shri/Kumari/Smt _____ whose specimen signature is attested below and certify that the applicant's eye sight is good that his/her constitution is sound and that he/she has not bodily disease or mental infirmity unfitting him/her now or likely to incapacitate him/ her now or likely to incapacitate him/ her in the future for manual work in the workshop or active outdoor service.

(Signature of the Registered
Medical Practitioner)

Signature of the Applicant _____

Name :

(Attested)