



Don Bosco Institute of Technology

Okhla Road, New Delhi- 110025

(Affiliated to GGSIPU, Delhi)

APPLICATION FORM FOR ADMISSION IN MANAGEMENT QUOTA (2024-25)

B.COM (HONS.)

CET APP. NO./ ROLL NO. _____ CET RANK _____ COURSE _____ BATCH 2024

CUET APP. NO./ ROLL NO. _____ CUET RANK _____ COURSE _____ BATCH 2024

1. NAME OF THE STUDENT: _____

NAME OF THE STUDENT (In Hindi): _____

2. SEX : M/F _____ DOB _____

3. CATEGORY : GEN/ SC/ST/OBC /EWS/MINORITY COMMUNITY: _____

4. REGION: (Passed class XII from) _____

5. FATHER'S NAME: _____

FATHER'S NAME (In Hindi): _____

6. MOTHER'S NAME: _____

MOTHER'S NAME (In Hindi): _____

7. FATHER'S OCCUPATION: _____ / MOTHER'S OCCUPATION _____

8. PERMANENT ADDRESS: _____

9. ADDRESS FOR CORRESPONDENCE: _____

10. AADHAR NUMBER: _____

11. BLOOD GROUP : _____

12. CONTACT DETAILS:

S.NO.	STUDENT MOBILE NO.	FATHER MOBILE NO.	MOTHER MOBILE NO.
MOBILE			
E-MAIL			

13. EDUCATIONAL QUALIFICATION'S

EXAMINATION	YEAR OF PASSING	NAME OF BOARD	SUBJECTS	PERCENTAGE OF MARKS
				BEST 5 SUBJECTS INCLUDING COMPULSORY SUBJECTS
10* Class				NA
12" C lass				
Any other				

JOINT DECLARATION BY STUDENT AND PARENT

I, _____ S/o, D/o, _____ to be a student of the Ist Semester of _____ programme of batch _____ have carefully read all the acts of discipline, misconduct, and attendance. I declare that I shall abide myself to the rules and regulations and shall accept the penalties in case I am found to be guilty. I shall attend the classes regularly and in case I need leave, I shall apply for leave in advance. If I fall sick for more than five days, then I shall produce Medical Certificate provided by the at least MBBS qualified and registered Doctor.

I, _____, father/mother of _____ here by declare that I shall ensure that my son/daughter's declaration in followed in totality.

Date:

Signature of Parent

Signature of Student

Application form can be submitted at e-mail Id : dbit.mq@gmail.com