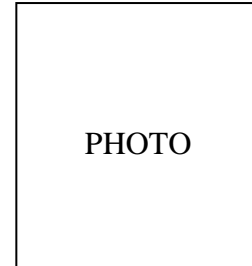


GOVT POLYTECHNIC EDUCATION SOCIETY, UTTAWAR (PALWAL)

APPLICATION FORM FOR VOCATIONAL DIPLOMA IN MEDICAL IMAGING TECHNOLOGY (MIT) ADMISSION

2024-2025

- 1 Name of the candidate _____
(as per 10th mark sheet)
- 2 Father's Name _____
- 3 Mother's Name _____
- 4 Gender _____
- 5 Date of Birth _____
- 6 Aadhar No (Attach Document) _____
7. Family ID (PPP ID no) _____
- 8 Haryana Residence Certificate (Yes/No) (Attach Document) _____
- 9 Category (Attach Document) _____
- 10 Whether apply under MAR Quota or not : Yes/No
(If yes then, Mewat Area Certificate No. _____)
- 11 10th Mark sheet (Attach Document)



Sr. No	Qualifying Exam	Roll No	Board	Marks Obtained	Total Marks	%age/CGPA
1.	10 th					

- 12 Complete Mailing Address _____

- 13 Contact No/ Mobile No _____
- 14 Any Special Category (Attach Document) KM/FF/ESM/TFW/PH/HGST
- 15 E-mail ID _____

Declaration:

I hereby certify that the information given by me in admission form is correct to the best of my knowledge and belief. In case any information given in this application proves to be false or incorrect, I shall be responsible for the consequences.

Place:

Date:

(Signature of Candidate)

Note:- All relevant attach documents should be self-attested / Gazetted officer.

For office use only

Documents Verification Team Document Verified Category Signature of Committee 1 _____ 2 _____ 3 _____	Seat Allotment team Seat Allotted in _____ Under Category _____ Signature of Committee 1 _____ 2 _____ 3 _____
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