



VASAVI COLLEGE OF ENGINEERING (Autonomous)
(Affiliated to Osmania University & Approved by A.I.C.T.E.)
Ibrahimbagh, HYDERABAD - 500031.

Application Form for Registration to B.E. _____ Year _____ Semester

(Main / Supplementary/ Advanced Supplementary)

Examinations to be held in the Month of _____, 20_____.

Branch: _____ **H.T. No.**

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Number of Subjects Registered:

*Examination Fee Paid: Rs. _____

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| 1. Affix latest Passport size photograph.
2. To be attested by the HOD with seal. |
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*For examination fee to be paid, please refer the notification

- Note: 1. Read the Instructions overleaf carefully before filling the application form**
- 2. Fee once paid will not be refunded.**
- 3. It may be noted that the candidates who pay the examination fee on or before the last day(without or with fine) need to submit the examination application form by the last day. Application forms will not be accepted after the stipulated date(s).**

Name of the Candidate (in Capital letters and as per Intermediate or equivalent)														
Father's Name (in Capital letters)														
Mother's Name (in Capital letters)														
Candidate's Residential Address														
Contact Number	Land Line:	Mobile:												
Date of Birth and Age at the time of submitting the Application	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">D</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">M</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td><td style="width: 20px; height: 20px;">Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Age	<input style="width: 30px; height: 20px;" type="text"/>	years		
D	D	M	M	Y	Y	Y	Y							
Intermediate or its equivalent examination which the candidate has passed	Name of the Board	Name of the examination	Year of Passing	Roll No.	Division									
Subjects in which the candidate desires to be examined	Theory	1.				7.								
		2.				8.								
		3.				9.								
		4.				10.								
		5.												
		6.												
	Practicals	1.				4.								
		2.												
		3.												

Date: _____

Signature of the Candidate

(P.T.O.)

IDENTIFICATION CERTIFICATE

(To be signed by the Head of the Department where the candidate has studied)

This is to certify that Mr/Mrs./Miss _____
son/daughter of _____ bearing HT.NO. _____
is the same candidate who has Passed/Promoted/Failed/Detained/Completed the _____
Examination of Vasavi College of Engineering(Autonomous) held in the month of _____,
20_____.

Further, the candidate has signed this certificate in my presence.

Signature of the Candidate _____

Date: _____

Signature of the HOD
(with seal)

INSTRUCTIONS TO THE CANDIDATES

1. All entries should be in the candidate's own handwriting and candidate will be held personally responsible for any incorrect entry that he/she makes.
2. The College reserves the right to cancel the admission of the candidate at any stage when it is detected that his or her admission to the Examination or the College is against rules.
3. The name of the candidate and that of his/her father given overleaf should correspond to those mentioned in the qualifying examination.
4. Any false or incorrect statement in the Application Form will render the candidate liable to disciplinary action.
5. Candidate should submit a photocopy of his/her Qualifying Previous Examination.
6. If the candidate belongs to any other University he/she should submit the MIGRATION CERTIFICATE with the prescribed Fee of Rs. 100/-
7. For details and full information with regard to the Examination, candidates should refer to the Rules, Regulations and Syllabus published in the Hand Book.